



# CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned **07 OCT 16 PM 3:08** submits for filing a certificate of Assumed Business Name.

Please type or print legibly.  
**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Simple Solutions for Assisted Living

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Brenda L Young</u>	<u>2775 N. Sweetwood Ave.</u>
<u>Robert L Young</u>	<u>" "</u>
	<u>Meridian, Idaho 83646</u>

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

Submit Certificate of Assumed Business Name and **\$25.00** fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

4. The name and address to which future correspondence should be addressed:

Brenda L. Young  
Simple Solutions for Assisted Living  
2775 N. Sweetwood Ave.  
Meridian Idaho

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Brenda L. Young  
(signature required)

Printed Name: Brenda L Young

Capacity/Title: Manager / owner  
(see instruction # 8 on back of form)

Secretary of State use only

g:\comp\forms\labr\_form\labr.j65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
**10/16/2007 05:00**  
CK: 1311518 CT: 172099 BH: 1888849  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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