

## **CERTIFICATE OF** ASSUMED BUSINESS NAME ILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2006 JUL 12 AM 8: 50

Please type or print legibly.

NOTE: See instructions on reverse before filing.	SECRETARY OF STATE
	STATE OF IDAHO
<ol> <li>The assumed business name which the undersigned business is:</li> </ol>	d use(s) in the transaction of
Idahana Go miduifu	
Idahoans for midwifery	
2. The true name(s) and <u>business</u> address(es) of the e	ntity or individual(s) doing
business under the assumed business name:	
<u>Name</u>	Complete Address
Caralle anderton 2144/11	onwood Dr. Idaho Falls. ID 83402
3. The general type of business transacted under the a	ssumed business name is:
☐ Retail Trade ☐ Transportation and Pub	lic Utilities
Wholesale Trade Construction	
Services	
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
	Socretory of State
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
	Basement West
Caralle anderton	PO Box 83720
2144 Ironwood D	Boise ID 83720-0080 208 334-2301
Idaho falls ID 83402	250 001 2501
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	218 542-1109
	<u> </u>
	Pagestani of Clate use only
	Secretary of State use only
Signature: Naralu ander for	and what a <u>explicit free a</u> the control of
Printed Name: <u>Caralee Anderton</u>	IDAHO SECRETARY OF STATE 97/12/2006 05:00
2 1 1 5 5	CK: 2372 CT: 158010 BH: 964490 1 0 25.00 = 25.00 ASSUM NAME 1 2
Capacity/Title: <u>fruitent</u>	D
(see instruction # 8 on back of form)	1) Inlan