

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

07 NOV 20 AM 8: 47

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

| The assumed business name which the und business is:  Pet Inn Place  | ersigned  | l use(s) in the transaction of   | -            |
|--|---|--|--------------|
| 2. The true name(s) and business address(es) business under the assumed business name Name  Scott H. Higer  Karen S. Higer   | e:<br>415                                       | ntity or individual(s) doing  Complete Address  N. Franklin Mendian ID 8: Franklin Mendian ID 8364           | 1            |
| 3. The general type of business transacted unity of the property of the proper | and Pub   |  |              |
| 5. Name and address for this acknowledgme copy is (if other than # 4 above):  Signature: Super (signature required)  Printed Name: Karen S. Higer  Capacity/Title: Owner  (see instruction # 8 on back of form)  | gitcorptormetaton formstabn.p65 Revised 04/2003 | Secretary of State use only  IDAHO SECRETARY OF STA  11/20/2007 ほう  CK: 8926 CT: 67785 BH: 1 1 2 25.88 ASSUM | <b>86259</b> |
|  |   | D:117005   |              |