

## **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. 2015 JAN 29 AM 9: 07

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

<ol> <li>The assumed business name which the business is:</li> </ol>	the undersigned use(s) in the transaction of
Body Intuit	
The true name(s) and <u>business</u> address business under the assumed busines <u>Name</u> Debra Haney	
	ted under the assumed business name is:
Services Agricult  Manufacturing Mining  Finance, Insurance, and Real E	Submit Certificate of Assumed Business
The name and address to which futur correspondence should be addressed      Debra Haney  629 Lonestar Rd	d: 450 North 4th Street PO Box 83720 Boise ID 83720-0080
Nampa, ID 83651	208 334-2301
5. Name and address for this acknowled copy is (if other than # 4 above):	dgment
	Secretary of State use only
Printed Name: Debra Haney	1DAHO SECRETARY OF STATE 01/29/2015 05:00
Capacity/Title:	CK:3062 CT:70609 BH:1459244 16 25.00 = 25.00 ASSUM NAME #
Signature:	
Printed Name:	0176373

Capacity/Title: