



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

JOURNEYS IN FAITH

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

Name

Complete Address

BON VOYAGE LTD.

1010 S. ORCHARD ST

BOISE ID 83705

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

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

Phone number (optional): 208 343 8121

JOURNEYS IN FAITH

1010 S. ORCHARD ST

BOISE ID 83705

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Patricia A. Baker

Printed Name: PATRICIA A. BAKER

Capacity: Pres. Bon Voyage Ltd.

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

06/15/1998 09:00
CX: 4816 CT: 100094 IN: 119732

1 @ 20.00 = 20.00 ASSUM NAME

D15881

Revision 1/98

g:\ccpforms\labn.pdf