



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

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

Senior Advisory Group

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

Name

Larry Travas Smith

Complete Address

603 10th Ave So Nampa Id  
83651

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 type="checkbox"/>	Services	<input type="checkbox"/>	Agriculture
<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>	Mining
<input checked="" type="checkbox"/>	Finance, Insurance, and Real Estate		

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

Senior Advisory Group  
603 10th Ave So Nampa Id  
83651

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

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

Phone number (optional):

Signature:

L. Travas Smith  
(signature required)

Printed Name: L. Travas Smith

Capacity/Title: President

(see instruction # 8 on back of form)

gicorpformsidb1.form565  
Revised 09/2002

Secretary of State use only

IDaho SECRETARY OF STATE  
02/18/2003 05:00  
CK: 5577 CT: 158810 BH: 663200  
1 e 20.00 = 20.00 ASSUM NAME # 2

D 62574

2003 FEB 18 AM 8:58  
STATE OF IDAHO  
FILED EFFECTIVE