

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 2 AH 8: 37 submits for filing a certificate of Assumed Business Name! 2

NOTE: See Instructions on reverse before filing RETARY OF STATE	
1. The assumed business name which the undersigne business is: Li H/e Ange/5 Da	SIAIE OF IDAHO
2. The true name(s) and business address(es) of the elbusiness under the assumed business name: Name Alicia R. Neuarez 22 Alice R. Neuarez	entity or individual(s) doing Complete Address How Mads Average How Tooks 83336
3. The general type of business transacted under the a	
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Little Angels SayCare 2240 Mars Ave. Heyburn, Idoho 83334	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): (208) 679-537/
	Secretary of State use only
gnature: Alicia R. Nevaret square squ	

S C (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE 67/12/2006 65:00 CK: 1821 CT: 158018 BH: 964467 1 # 25.80 = 25.80 ASSUM MAME # 2

