



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned **10 MAR -8 AM 9:21**
submits for filing a certificate of Assumed Business Name.

Please type or print legibly.
NOTE: See instructions on reverse before filing.

**SECRETARY OF STATE
STATE OF IDAHO**

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

Better Records Bookkeeping Service

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

Name	Complete Address
<u>Jennifer Bustamante</u>	<u>1001 W. 15th Ave. Post Falls, ID 83854</u>

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

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

Same as above

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

Same as above

Signature

Jennifer Bustamante
(signature required)

Printed Name:

Jennifer Bustamante

Capacity/Title:

Owner / Certified Bookkeeper
(see instruction # 8 on back of form) (B)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

g:\csp\forms\labn forms\labn.p65 Revised 04/2003

IDAHO SECRETARY OF STATE
03/08/2010 05:00
CK: 6422 CT: 158010 RN: 1211523
1 @ 25.00 = 25.00 ASSUM NAME # 2

D137485