



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2015 DEC 15 AM 8:30

SECRETARY OF STATE
STATE OF IDAHO

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

LIVE LAUGH LEARN at Bunny's Place

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

<u>Name</u>	<u>Complete Address</u>
<u>Loreal Lautenschlager</u>	<u>222 Thain Rd</u>
	<u>LEWISTON ID, 83501</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 checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

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

222 Thain Rd.
Lewiston Id 83501

Submit Certificate of
Assumed Business
Name and \$25.00 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):

(208) 305-7242

Secretary of State use only

IDAHO SECRETARY OF STATE

12/15/2015 05:00

CK: 620563 CT: 317902 BH: 1504350
1@ 25.00 = 25.00 ASSUM NAME #2

D183187

Signature: [Signature]

(signature required)

Printed Name: Loreal Lautenschlager

Capacity/Title: #4

(see instruction # 8 on back of form)