

FILED EFFECTIVE



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.

2007 JAN 11 AM 9:48

SECRETARY OF STATE
STATE OF IDAHO

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

P & P Pet Care

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

Phil Murphy

3765 E. 3200 N. Hansen, Id 83334

Pam Murphy

3765 E. 3200 N. Hansen, Id 83334

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 | |

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

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

Phil and Pam Murphy
3765 E. 3200 N.
Hansen, Id 83334

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

Phone number (optional):

208-423-4202

Secretary of State use only

Signature:

Phillip L. Murphy
(signature required)

Printed Name:

Phillip L. Murphy

Capacity/Title:

President

(see instruction # 8 on back of form)

g:\corp\information\form\labn.pdf
Revised 04/2003

IDAHO SECRETARY OF STATE
01/11/2007 05:00
CK: 6268 CT: 158018 BH: 1025577
1 @ 25.00 = 25.00 ASSUM NAME # 2

D107086