

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2016 JAN -6 PM 2: 10

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

The assumed business name which the undersigned use(s) in the transaction of business is: CUARDING ANGELS DAYCARE	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name HOLLYN PEDERSON 70 B	Complete Address
3. The general type of business transacted under the Retail Trade Transportation and Po Wholesale Trade Construction Services Agriculture Manufacturing Mining	ublic Utilities Submit Certificate of
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: GUARDING ANGELS DAVCARE PO BOX 264	Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
PINEHURST, ID 838500 5. Name and address for this acknowledgment copy is (if other than #4 above):	
nature: Hellin Belinon	Socretary of State use only
pacity/Title: OWNER	IDAHO SECRETARY OF STATE 01/06/2016 05:00

CK:3497542 CT:172099 BH:1507260 10 25.00 = 25.00 ASSUM NAME #2

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Printed Name: _ Capacity/Title: _