

**CERTIFICATE OF ASSUMED BUSINESS NAME**

**(Please type or print legibly)**

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

KAE'S BILLING SERVICE

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

Kathie Smith

Complete Address  
2021 M. st Heyburn, Idaho 83336

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

Retail Trade       Manufacturing       Transportation and Public Utilities  
 Wholesale Trade       Agriculture       Finance, Insurance, and Real Estate  
 Services       Construction       Mining

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

Kathie Smith

P.O. Box 53

Heyburn, Idaho 83336

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

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: Kathie Smith

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Secretary of State use only

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1998 REVIEW ARTICLE 22

Printed Name: Kathy Smith

Capacity: 1000cc

(see instruction # 8 on back of form)

D 4/18/17