



# 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**

10 JUN 23 AM 8:16

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:

St. Joseph's Holistic 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

St. Joseph's Enterprises, LLC

14970 W. Stub Ave., Rathdrum, ID 83858

(W94383)

3. The general type of business transacted under the assumed business name is:

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

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

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

St. Joseph's Enterprises, LLC

14970 W. Stub Ave.

Rathdrum, ID 83858

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

same

Signature: Wayne N. Bullington

(signature required)

Printed Name: Wayne N. Bullington

Capacity/Title: Manager

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\labn form\labn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
06/23/2010 05:00  
CK: 2885 CT: 249128 BH: 1227805  
1 @ 25.00 = 25.00 ASSUM NAME #

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