

# 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:

COMFTY CARE

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

PATRICIA L. FORNOF 12620 N CHASE RD RATHDRUM  
ID, 83858

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

TRICIA FORNOF  
12620 N. CHASE RD.  
RATHDRUM ID 83858

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: [Signature]

Printed Name: Tricia FornoF

Capacity: \_\_\_\_\_

(see instruction # 8 on back of form)

Revision 2/97  
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Secretary of State use only

IDAHO SECRETARY OF STATE

11/01/2000 09:00  
CX: 1729 CT: 137965 DH: 356129

1 @ 20.00 = 20.00 ASSUM NAME # 2

D40188

**FILED/EFFECTIVE**