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CERTIFICATE OF	
ASSUMED BUSINESS	
Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B	e undersigned 12 IAN _ C PM 12: 37
Please type or print legibly, Instructions are included on back of app	lication.
 The assumed business name which the undersigned use(s) in the transaction of business is: 	
Wagging Tails Pet Outfitters	
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
Deborah K Wonch	713 N. Kerogen Place, Kuna, ID 83634
 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Deborah Wonch 713 N Kerogen Place Kuna, ID 83634 5. Name and address for this acknowledgment copy is (if other than # 4 above):	and Public Utilities Submit Certificate of 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
	Secretary of State use only
Signature: Reborah Wonch	
Printed Name: Deborah Wonch	
Capacity/Title:	IDAHO SECRETARY OF STATE 01/06/2012 05:00
Signature: Printed Name:	CK: CASH CT: 158010 BH: 1384928 1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title:	The second
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