



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2003 JAN -9 PM 8:54

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Kaleidoscope Child Care and Development

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

Name

Kristi Jo Richmond

Complete Address

3101 W. Targhee 83705

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

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

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

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

Kristi Jo Richmond

DBA Kaleidoscope Child Care and Development

3101 W. Targhee Boise, Id. 83705

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

Phone number (optional):

Signature: Kristi Jo Richmond
(signature required)

Printed Name: Kristi Jo Richmond

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 09/2002

IDAHO SECRETARY OF STATE
01/09/2003 05:00
CK: 3288 CT: 156818 BH: 655715
1 # 20.00 = 20.00 ASSUM NAME # 2

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