

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

2009 JUN 22 AM 11: 12

SEURETARY OF STATE. STATE OF IDAHO

submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

<ol> <li>The assumed business name which the undersigned use(s) in business is:</li> <li>Knickerdoodles Pet Care and</li> </ol>	
2. The true name(s) and business address(es) of the entity or in business under the assumed business name:  Name  Complete Salsman  2965 Legis Dawn Salsman 2965 Lembin	ete Address mhi ST Boise S
3. The general type of business transacted under the assumed I	business name is:
Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Caule Sal Sman	nit Certificate of med Business and \$25.00 fee to: Secretary of State 4th Street x 83720 D 83720-0080
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
signature: Bayle Salaman 8 8	
Signature: Sayle Salaman  Printed Name: Gayle Salaman  Capacity/Title: Owner	IDAHO SECRETARY OF STATE 26/22/2 <b>929 65:00</b> CX: 7862 CT: 238283 MH: 1175759

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