## FILED EFFECTIVE

227	
CERTIFICATE OF	
ASSUMED BUSINESS NAM	
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business National Section 1997	· · · · · · · · · · · · · · · · · · ·
Please type or print legibly.	
submits for filing a certificate of Assumed Business Name. Please type or print legibly. NOTE: See instructions on reverse before filing. SECREMAN OF STATE STATE OF IDAHO	
1. The assumed business name which the undersigned use(s) in the transaction of business is: <u>Alzheimer's Association Greater Idoho Chapter</u>	
2. The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed business name: Name (C」49964) Complete Address	
Alzheimer's Disease 1111 L. Orchard St. Suite 200	
Alzheimer's Disease 1111 L. Orchard At., Suite 200 and Related Disorder's Boise, DD 83705	
Association, Onen-Greater Idaho Chapter	
3. The general type of business transacted under the assumed business name is:	
<ul> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> <li>The name and address to which future</li> </ul>	lic Utilities Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to: Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street PO Box 83720
11 Same "	Boise ID 83720-0080
	(208) 334-2301
	· · · · · · · · · · · · · · · · · · ·
<ol> <li>Name and address for this acknowledgment COPY IS (If other than # 4 above):</li> </ol>	
	Secretary of State use only
Signature: <u>Mary Kette Turnel</u> Printed Name: <u>Mary Auzette Tunnel</u> Capacity/Title: <u>Capacity/Title:</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/27/2008 05:00 CK: 1165 CT: 230950 BH: 1141924 1 0 25.00 = 25.00 ASSUM NAME # 2
	D125863