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CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2005 SEP 26 AM 9:58

SECRETARY OF STATE OF IDAHO

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

Munchkins

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

Name

Complete Address

Tamara M. Burns

3210 E. Chinden Blvd.#115-511 Eagle, ID 83616

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

☐ Retail Trade

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Construction

☒ Services

☐ Agriculture

☐ Manufacturing

☐ Mining

☐ Finance, Insurance, and Real Estate

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

Tamara M. Burns

3210 E. Chinden Blvd.#115-511

Eagle, ID 83616

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

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

Signature:

Tamara M. Burns
(signature required)

Printed Name:

Tamara M. Burns

Capacity/Title:

Owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
09/26/2005 05:00
CK: 620161 CT: 172099 BH: 913670
1 @ 25.00 = 25.00 ASSUM NAME # 2

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