

Signature: Sunke

Capacity/Title: Owner

Printed Name: Brenda Lee

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAMELED EFFECTIVE

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

07 JUN 14 PM 12: 26

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETAL OF STATE STATE OF IDAHO

		OWNE CHIDATO	
1. The assumed business name	e which the undersigne	ed use(s) in the transaction of	
business is:	. 0		
<u>Everyday Angels</u>			
	101/1010/		
2. The true name(s) and busine	es address(es) of the	entity or individual(s) doing	
business under the assumed		or marriada (c) doing	
Name	r basiness name.	Complete Address	
ivaine (	0×1.		1.1
DAnna Smith	<u> </u>	x632/13 Willis Way Idaho	7 ty 8363
Brendo her hace	na 3909	Le Land Way Brise In	183207
<del>\(\tau\)</del>	<del></del>	<i>y</i>	/
3. The general type of business	s transacted under the	assumed husiness name is:	
o. The general type of Edemost	, transacted ander the	assumed business name is.	
Retail Trade	Transportation and Pu	blic Utilities	
☐ Wholesale Trade	Construction		
Services	Agriculture	Submit Certificate of	
Manufacturing	Mining	Assumed Business	
Finance, Insurance, ar	nd Real Estate	Name and \$25.00 fee to:	
4. The name and address to wi	nich future	Secretary of State	
correspondence should be a	ddressed:	450 North 4th Street	
$A \cap A \cap A$		PO Box 83720	
Brenda Lee La	ing	Boise ID 83720-0080	
3909 Le Lead When	J	208 334-2301	
Rise TI Gala	29		
Morse Ind 8 47	<u>~ /                                     </u>		
5. Name and address for this	acknowledgment	Phone number (optional):	
CODY IS (if other than # 4 above):	·	(208) 362-0324	
0'n / 4	_	(200) 362-03A-7	
WAnna Smith			
OBOX 732 Tolah	City	Secretary of State use only	
52131	$\mathcal{J}$	0	_
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IDAHO SECRETARY OF STATE

US/14/2007 US: US

CK: 1178898 CT: 172099 BH: 1060084
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