

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2015 MAR 25 PM 4: 27

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

The assumed business name which the under business is:      Beberian School of F	
The true name(s) and <u>business</u> address(es) o business under the assumed business name: <u>Name</u>	
Susan Stephens	2059 Pinto Ave. Pocatello, 10 83201
3. The general type of business transacted unde  Retail Trade Transportation as  Wholesale Trade Construction  Services Agriculture	er the assumed business name is: and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  2059 Pinto Ave.  Pocatello, ID 83201	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):  5u.san Stephens 2059 Pinto Ave.	
Signature:Susan_Stephens	Secretary of State use only  IDAHO SECRETARY OF STATE  03/25/2015 05:00
Capacity/Title: Divector	CK:5314 CT:158010 BH:1467938
Signature:	16 25.00 = 25.00 ASSUM NAME #2
Printed Name:	715

1)177829

Capacity/Title: