



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2017 JAN 17 AM 11:21

SECRETARY OF STATE
STATE OF IDAHO

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

TRUENORTH COUNSELING & CONSULTING

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

SHAWN PARMANAND LLC 766 WENDY CHUBBUCK ID 83202

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐

Retail Trade

☐

Construction

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Mining

☒

Services

☐

Manufacturing

☐

Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

VIRGIL LARSON

(Name)

890 DELL RD

(Address)

CHUBBUCK ID 83202

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: SHAWN PARMANAND

Signature: Shawn Parmanand

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

01/17/2017 05:00

CK:4495952 CT:172099 BH:1564154

1@ 25.00 = 25.00 ASSUM NAME #3

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