

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2007 JUL 12 AM 9:03

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.

**SECRETARY OF STATE
STATE OF IDAHO**

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

Tiny Toes Daycare

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
Sabrina Vail	223 South 450 East Burley, ID 83318
Joey Vail	223 South 450 East Burley, ID 83318

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

Sabrina Vail
223 South 450 East
Burley, ID 83318

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

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

Phone number (optional):

208-431-2212

Signature: Sabrina Vail (signature required)
Printed Name: Sabrina Vail
Capacity/Title: Owner
(see instruction # 8 on back of form)

Q:\corp\forms\AssumedBusinessNameForm.ps5
Revised 04/2003

Secretary of State use only

IDaho SECRETARY OF STATE
07/12/2007 05:00
CK: 1052 CT: 158018 DR: 1065118
1 0 25.00 = 25.00 ASSUM NAME # 2

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