

## 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.

(see instruction # 8 on back of form)



C1803 a

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<ol> <li>The assumed business name which the undersigned business is:</li> </ol>	ed use(s) in the transaction of
Precision K-9	
2. The true name(s) and <u>business</u> address(es) of the obusiness under the assumed business name:  Name  Paula Xan Macallum 4731	entity or individual(s) doing  Complete Address  N. Eugene St. Boise ID  83703
3. The general type of business transacted under the a	assumed business name is:
Retail Trade Transportation and Pul Wholesale Trade Construction	blic Utilities
⊠ Services	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Paula Mc (ollow 473) N. Eugene 5th	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
Par 10 803,403	208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above):</li> </ol>	Phone number (optional):
	Secretary of State use only
Signature: Sacra Colling Signature required)  Printed Name: Sacra Yan McCellin Capacity/Title: owner	IDAHO SECRETARY OF STATE 12/17/2002 05:00 CK: 4899 CT: 158010 BH: 651825 1 0 20.00 = 20.00 ASSUM NAME # 2