



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED/EFFECTIVE**

NOV 25 AM 8:31

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

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

KD's Kabin

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Kristina J. Bird

Daniel E. Bird

Complete Address

16356 N. Asbury Drive Nampa, ID 83651

16356 N. Asbury Drive Nampa, ID 83651

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

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input 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:

KD's Kabin

16356 N. Asbury Drive

Nampa, ID 83651

Submit Certificate of  
Assumed Business  
Name and \$20.00 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) 442-7278

Secretary of State use only

Signature: Kristina J. Bird

(signature required)

Printed Name: Kristina J. Bird

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 09/2002

IDAHO SECRETARY OF STATE  
11/26/2002 05:00  
CK: 383 CT: 158818 DN: 648123  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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