

## **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. Instructions are included on back of application. STATE OF DAHO

2.	Paula Laws Insurance  The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
	<u>Name</u>		Complete Address	
3.	Paula Laws	14205 N	Cascade Street	
	РО Вох		273	
	Rathdrun		n ID 83858	
	☐ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture	n and Pu		
	<ul><li>■ Manufacturing</li><li>■ Mining</li><li>■ Finance, Insurance, and Real Estate</li></ul>		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: Paula Laws		Secretary of State 450 North 4th Street PO Box 83720	
	PO Box 273		Boise ID 83720-0080 208 334-2301	
	Rathdrum ID 83858			
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt		
Signa	iture Jaul X Laws		Secretary of State use only	
	ed Name: PAULA J. LAWS city/Title: Agent			
igna	iture:			
rinte	ed Name:		IDAHO SECRETARY OF STATE 02/05/2013 05:00	
apacity/Title:		İ	CK: 1287 CT: 279014 BH: 1358754 1 8 25.80 = 25.80 ASSUM NAME #	

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