



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 NOV -3 AM 8:24

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.  
NOTE: See instructions on reverse before filling.

FILED EFFECTIVE

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

Heart 2 Heart ~~Wood~~ Ranch

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

Name  
Trinity Jackson  
\_\_\_\_\_  
\_\_\_\_\_

Complete Address  
25948 Vermont Street  
Parma, Id. 83660  
\_\_\_\_\_

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

Retail Trade       Transportation and Public Utilities  
 Wholesale Trade       Construction  
 Services       Agriculture  
 Manufacturing       Mining  
 Finance, Insurance, and Real Estate

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

Trinity Jackson  
25948 Vermont Street  
Parma, Id. 83660

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

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

\_\_\_\_\_  
\_\_\_\_\_

Secretary of State use only

Signature: Trinity Jackson  
(signature required)

Printed Name: Trinity Jackson

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 04/2003

IDaho SECRETARY OF STATE  
11/03/2008 05:00  
CK: 7545 CT: 158010 BH: 1142655  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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