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CERTIFICATE OF ASSUMED BUSINESS NAME

2013 FEB i 3 PM 3: 33

SECRETARY OF STATE STATE OF IDAHO

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. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Peg's Pup Treats 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 Peggy Lynd 1008 Tamarack Road, Troy, ID 83871 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 Submit Certificate of Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future correspondence should be addressed: Secretary of State 450 North 4th Street Peggy Lynd PO Box 83720 1008 Tamarack Road Boise ID 83720-0080 208 334-2301 Troy, ID 83871 5. Name and address for this acknowledgment CODY IS (if other than # 4 above):

Secretary of State use only

IDAHO SECRETARY OF STATE

@2/13/2013 @5:00

CK: 1286155 CT: 172899 BH: 1360168
1 8 25.88 = 25.88 ASSUM NAME # 2

9/21/2012

Signature:

Signature: _____

Printed Name: ____

Capacity/Title:

Printed Name: Peggy Lynd

Capacity/Title)Owner

abn.pmd (Rev. 07/2010

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