

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 NOV 22 PH 2: 34

STATE OF MAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

MOTE. Occ mandending on reverse before	ııııy.		
The assumed business name which the under business is:	ersigne	d use(s) in the transaction o	f
<u>Cuddlebugs Daycare</u>			···
<ol> <li>The true name(s) and business address(es) of business under the assumed business name:</li> </ol>		entity or individual(s) doing	
Name		Complete Address	
Carolyn F. Crump 4	<u>II. 5.</u>	Moffatt Ave Emmett	- <u>IO</u> 83617
			<del></del>
3. The general type of business transacted under	er the a	assumed business name is:	
Retail Trade Transportation a Wholesale Trade Construction	ind Pul	olic Utilities	
Services		Submit Certificate of	
☐ Manufacturing ☐ Mining		Assumed Business	
Finance, Insurance, and Real Estate		Name and \$25.00 fee to:	
4. The name and address to which future		Secretary of State	
correspondence should be addressed:		700 West Jefferson Basement West	
Cuddlebuas Dayrake		PO Box 83720	
411 5 Moffatt Ave		Boise ID 83720-0080	
Emmett ID 83617		208 334-2301	
5. Name and address for this acknowledgment	t	Phone number (optional):	
COPy is (if other than # 4 above):			
		Secretary of State use on	lly
	65		
Signatura: Caralia 7 Cara	skabn.p	$\mathcal{D}$ 8	213:
Signature: Lardy J. Cump (signature required)	on form	IDAHO SECRETARY	DE STATE
Printed Name: <u>Carolyn F. Crump</u>	forms\abn form Revised 04/2003	11/22/2004	4 05:00 BH: 778867
Capacity/Title: Owner	g:\corp\forms\abn forms\abn.p65 Revised 04/2003	1 @ 25.00 = 25.00	ASSUM HAME # 2
(see instruction # 8 on back of form)	, g		