

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

JEEB 28 AN II: 20

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

SEUMENAL OF STATE STATE OF IDAHO

The assumed business name which the undersigned use(s) in the transaction of business is: AT PAWS CICANING	
2. The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u> **ATHY T BARNES	me: <u>Complete Address</u>
3. The general type of business transacted uses a Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ATHY T. BARNES	Submit Certificate of Assumed Business
5. Name and address for this acknowledgm copy is (if other than # 4 above):	Phone number (optional): 308-461-3036
	Secretary of State use only

Printed Name: HATHY T. BARNES

Capacity/Title: LUTOR

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE

93/91/2005 95:00

CK: CASH CT: 150010 BH: 795722

8 25.00 = 25.00 ASSUM NAME # 2