



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name.

**FILED/EFFECTIVE**

00 MAY 11 AM 10:03

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

Facial Impressions

STATE OF IDAHO

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

Name

Complete Address

Kathy Coburn

3719 E. 38 N.

Rigby, Id 83442

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

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

Phone number (optional):

208-745-0044

Kathy Coburn

3719 E. 38 N.

Rigby Id 83442

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

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature:

Kathy Coburn

Printed Name:

Kathy Coburn

Capacity:

Owner

(see instruction # 6 on back of form)

IDAHO SECRETARY OF STATE

05/11/2000 09:00  
CK: 4840 CT: 00063 BH: 316949

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 35711