

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

FILED EFFECTIVE

04 NOV 15 AM 11: 21

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of	
business is:	a davation
My Sister and Me	
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
<u>Name</u>	Complete Address
	1303 N. 15th St. Boise ID 93702
Catherine L Hennig	4730 N VIlla Ridge Wy Boise ID 85703
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction	and Public Utilities
Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
John M. Neward 1303 N. 15th St.	PO Box 83720 Boise ID 83720-0080 208 334-2301
Boise, 70 83702	
Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional): 208-345-2750
	Secretary of State use only
Signature: Signature required	IDAHO SECRETARY OF STATE 11/15/2004 05:00 CK: 1081 CT: 158010 BH: 776534 1 0 25.00 = 25.00 ASSUM NAME # 2
Printed Name: Ju Ann M. Newcomb	SECOND SECRETARY OF STATE 11/15/2004 05:00 CK: 1081 CT: 158010 BH: 776534 CK: 1081 CT: 15
Capacity/Title: Partney	H H