

Printed Name: _ Capacity/Title:_

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 of print legibly

11 APR 18 PM 12: 25

	Instructions are included on back of application	on.
		SECRE GRY OF STATE
1.	The assumed business name which the undersigned use(s) which the transaction of business is: Peace In The Valley	
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
	Name //	Complete Address
	Shelly Kay Hansen p.	0-Box 325
		nehirst Idaho
		83850
3.	The general type of business transacted under the	he assumed business name is:
	☐ Retail Trade ☐ Transportation and ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture	Public Utilities
	Manufacturing Mining	Submit Certificate of
	Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future	Secretary of State
	correspondence should be addressed:	450 North 4th Street
	Sholly Ray Hanson	PO Box 83720 Boise ID 83720-0080
	p.o. 20x 325	208 334-2301
_	prochurst, Idapo 83850	
5.	Name and address for this acknowledgment CODY is (if other than # 4 above).	
	Same	
		Secretary of State use only
Signa	ture: Shall Hansu	
Printe	ed Name: Shelly Hansen	
	city/Title: Massage Therapist	
-	ture:	IDANO SECRETARY OF STATE 04/19/2011 05:00
Printed Name:		CK: 4175 CT: 158010 BH: 1269851 1 0 25.00 = 25.00 ASSUM NAME # 2

abn.pmd Rev. 07/2010

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