



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

10 NOV -1 PM 4:48

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

Home Again Animal Shelter

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

<u>Name</u>	<u>Complete Address</u>
<u>Patrick P. Jones, DVM</u>	<u>702 US Hwy 30 E</u>
<u>Lori Ann B. Jones</u>	<u>Buhl ID</u>
	<u>83316</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Home Again Animal Shelter
702 US Hwy 30 E.
Buhl, ID 83316

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Secretary of State use only

Signature: [Signature]

Printed Name: Patrick P. Jones

Capacity/Title: owner

Signature: [Signature]

Printed Name: Lori Ann B Jones

Capacity/Title: Owner

IDAHO SECRETARY OF STATE
11/02/2010 05:00
CK: 3359 CT: 220761 BN: 1245515
1 @ 25.00 = 25.00 ASSUM NAME # 2

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