

CERTIFICATE OF ASSUMED BUSINESS NAME

09 JUL 13 AM 8: 34

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: Moore Hugs Child Care 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name **Complete Address** Marie Moore 12429 West Abram Drive Borse, 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade **Agriculture** Services Submit Certificate of Assumed Business Manufacturing Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 (208) 334-2301 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only

Signature Limbert Ann Moore

Capacity/Title:

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE Ø7/13/2009 95:00 CK: 1991 CT: 238738 BH: 1178500 1 0 25.00 = 25.00 ASSUM NAME # 2

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