

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

DC Bool	okkeeping Services	_
2. The true name(s) and business address business under the assumed business n Name Darlene Cherry	• • • • • • • • • • • • • • • • • • • •	-
B. The general type of business transacted Retail Trade Transportation Wholesale Trade Construction	ation and Public Utilities	-
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta The name and address to which future correspondence should be addressed: DC Bookkeeping Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:	સર્થ
2115 E. Sherman Avenue #201	(208) 334-2301	
5. Name and address for this acknowledge Copy is (if other than # 4 above). Darlene Cherry	gment	
2115 E. Sherman Avenue #201	Secretary of State use only	
nature: (signature required) nated Name: Darlene Cherry pacity/Title: Owner (see instruction # 8 on back of form)	Stoonbloms to the stood of	TATE