

227

FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 DEC 12 PM 2:00

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Children and Family Therapy Clinic

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

AAA American Healthcare, LLC

1301 East 17th Street Suite 5.

W119563

Idaho Falls, ID 83404

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 |  |

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

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

Children and Family Therapy Clinic

1327 East 17th Street,

Idaho Falls, Idaho 83404

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

Children and Family Therapy Clinic

1301 East 17th Street Suite 5

Idaho Falls, ID 83404

Signature: [Signature]

Printed Name: Alban Hatch

Capacity/Title: Owner

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

12/12/2014 05:00

CK:2423004 CT:172099 RH:1452831

1@ 25.00 = 25.00 ASSUM NAME #2

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