

Printed Name: ____

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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 or print legibly.

NOTE: See instructions on reverse before filing.

08 SEP -4 AM 8: 42 SECRETARY OF STATE STATE OF IDAHO

D124563

The assumed business name which the undersigned use(s) in the transaction of business is: BordeRdAle Kennels	of
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 ARY PELERSON ARY PELERSON Complete Address ARY PELERSON	CAldwell 7
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Agriculture Submit Certificate of	
Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State	
Correspondence should be addressed: Borderdale Kennels (deli) lefetson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	40
Secretary of State use or	nty
ignature: (algoristure required) rinted Name: Debi teterson CK: 134726 C 1 25.80 =	ECRETARY OF STATE 2008 05:00 T: 158010 BH: 1134284 25.00 ASSUM NAME # 2