

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

FILED



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

88 JUN 11 AM 8:23

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

Brighter Tomorrow Family & Children's Services

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

Name

Complete Address

6123963

Bryan Family Corporation 965 W. Hwy. 26, Blackfoot, ID 83221

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

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

Susan Bryan  
P.O. Box 1394  
Blackfoot, ID 83221

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature: Susan Bryan

Printed Name: Susan Bryan

Capacity: President

(see instruction # 8 on back of form)

Revised 2/87  
If completed and filed

IDAHO SECRETARY OF STATE

06/11/1998 09:00  
CK: 24 CT: 99924 BH: 118687

1 @ 20.00 = 20.00 ASSUM NAME

DI 5772