



# 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.  
Instructions are included on back of application.

2015 DEC 30 AM 8:44

SECRETARY OF STATE  
STATE OF IDAHO

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

Sandpoint MFT

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

Name

Sandpoint Marriage & Family Therapy LLC

(W160248)

Complete Address

1327 Superior St., Ste 103, Sandpoint, ID 83864

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:

Sandpoint Marriage & Family Therapy LLC

PO Box 653

Sagle, ID 83860

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

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

Secretary of State use only

Signature: Ryan McMiller, LMFT

Printed Name: Ryan McMiller, MS, LMFT

Capacity/Title: Governor

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

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

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

IDAHO SECRETARY OF STATE  
12/30/2015 05:00  
CK:1203 CT:318358 EH:1506231  
1@ 25.00 = 25.00 ASSUM NAME #2

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