

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



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.

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

WOODS BOOKKEEPING

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

Lori Woods

Complete Address

14936 Eagle Dr Caldwell ID 83607

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

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

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

Lori Woods

14936 Eagle Dr

Caldwell, Idaho 83607

Phone number (optional):

453-9030

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

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

Signature:

Lori Woods

Printed Name:

Lori Woods

Capacity:

OWNER

(see instruction # 8 on back of form)

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

IDAHO SECRETARY OF STATE  
12/12/2002 05:00  
CK: CASH CT: 150010 BH: 650902  
1 @ 20.00 = 20.00 ASSUM NAME # 2

D60653

FILED/EFFECTIVE