

mailed ck # 1584
w 8-12-09

227



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.

09 AUG 14 AM 8:18
SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

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

Lake City Britches and Daws Childcare

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

Barbara J (Pat) Schenck
Jack F Schenck Jr

901 N 3rd St

Coeur d'Alene

Idaho 83834

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

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

Barbara J (Pat) Schenck
501 N McGuire Rd
Post Falls Idaho 83854

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

Same

Phone number (optional):

208 640-3031

Secretary of State use only

Signature: Barbara J. (Pat) Schenck

Printed Name: Barbara J (Pat) Schenck

Capacity/Title: owner/director

(see instruction # 8 on back of form)

g:\corporate\form\statebn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
08/14/2009 05:00
CK: 1584 CT: 158018 BH: 1182891
1 @ 25.00 = 25.00 ASSUM NAME # 2

D/132858