

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE

Please type or print legibly. Instructions are included on back of application.

The assumed business name which the business is:	
Little Bless	ings Family Daycare
The true name(s) and <u>business</u> address business under the assumed business r <u>Name</u> Emma Corum	
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	tion and Public Utilities on Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Emma Corum 16868 N Gentry Drive Nampa, ID 83687	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgr copy is (if other than # 4 above):	ment -
Signature: Emma Corum	_ Secretary of State use only
Printed Name: Emma Corum	
Capacity/Title: Owner/Operator	_
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	
Capacity/Title:	

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