



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

09 NOV 16 AM 9:23

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

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

Pawsitive Pet Coaching

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
Beth Mendoes	5355 W Crossridge Ct
	Meridian, ID 83646

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Beth Mendoes  
 5355 W Crossridge Ct  
 Meridian, ID 83646

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Idaho Secretary of State  
 450 N 4th Street  
 PO Box 83720  
 Boise ID 83720-0080

(208) 334-2301

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

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

Signature: Beth Mendoes  
(signature required)

Printed Name: Beth Mendoes

Capacity/Title: Pet Training Coach

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE  
 11/16/2009 05:00  
 CK: 1000 CT: 242297 BH: 1195585  
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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