



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.

FILED EFFECTIVE

09 SEP 21 AM 8:58
SECRETARY OF STATE
STATE OF IDAHO

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

WOMEN OF ST. IGNATIUS

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

Name
ST. IGNATIUS OF ANTIOCH ORTHODOX

Complete Address
1830 ADDISON AVENUE EAST

MISSION, INC.

TWIN FALLS, ID 83301

(C117121)

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 | |

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

WOMEN OF ST. IGNATIUS

1830 ADDISON AVENUE EAST

TWIN FALLS, ID 83301

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:

Karen Hefner
(signature required)

Printed Name:

KAREN HEFNER

Capacity/Title:

TREASURER

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
09/21/2009 05:00
CK: 98583455 CT: 158810 BH: 1187751
1 @ 25.00 = 25.00 ASSUM NAME # 2

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