27			
A CONTRACTOR	CERTIFICATE OF	<b></b>	
ASSUMED BUSINESS NAME			
	Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B	ne undersigi	me. 2004 AUG Ib A
Please type or print legibly.       SECONTARY OF STATE         NOTE: See instructions on reverse before filing.       STATE OF IDAHO			
VI IDAHO VI			
<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> </ol>			
Starting Small Childcare			
<ol><li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:</li></ol>			
Name <u>Complete Address</u> postfalls, Id.			
(I) <u>To</u>		1461	Est 3rd Street 83854
t.			
<ol><li>The general type of business transacted under the assumed business name is:</li></ol>			
Retail Trade Transportation and Public Utilities			
	Wholesale Trade Construction		
	Services Agriculture		Submit Certificate of
			Assumed Business
	Manufacturing L Mining		Name and <b>\$25.00</b> fee to:
	Finance, Insurance, and Real Estate		
4 The	name and address to which future		Secretary of State
	espondence shouid be addressed:		700 West Jefferson
	•		Basement West
	starting Small I + II		PO Box 83720 Boise ID 83720-0080
	P.O. BOX 849		208 334-2301
Rathdrum, Id.			
83858 Dhana number (antional):			
	me and address for this acknowledgm	ent	
со	py is (if other than # 4 above):		(208)661-1996
			Secretary of State use only
		ß	000155
Simplure: Farmer M. Lance			1),1412,1
Signature: <u>Fammy</u> <u>M. Jange</u> (signature required) Printed Name: <u>Tammy</u> <u>M. Lange</u> Capacity/Title: <u>OWNER</u> <u>Opperator</u> <u>Capacity/Title:</u> <u>OWNER</u> <u>Opperator</u>			
Printed Name: <u>Jammy M. Lange</u> 1 e 25.80 = 25.00 ASSUM NAME # 2			
Capacity/	Title: <u>Owner</u> Opperator	dica, i	
	(see instruction # 8 on back of form)	5	
11		1	