

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

10 JUN 28 PM 12: 36

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

Diapers for Kids			
2. The true name(s) and business address(es		entity or individual(s) doing	
business under the assumed business nan Name	ne:	Complete Address	
		62 Bungalow Dr, Idaho Falls, ID 83401	
3. The general type of business transacted un	nder the a	assumed business name is:	
✓ Retail Trade Transportation	n and Pul	blic Utilities	
Wholesale Trade Construction			
Services Agriculture		Submit Certificate of	
Manufacturing		Assumed Business	
Finance, Insurance, and Real Estate		Name and \$25.00 fee to:	
4. The name and address to which future		Secretary of State	
correspondence should be addressed:		700 West Jefferson	
Sherri Stacey		Basement West PO Box 83720	
2862 Bungalow Drive		Boise ID 83720-0080	
ldaho Falls, ID 83401		208 334-2301	
5. Name and address for this acknowledgme	ent	Phone number (optional):	
COPY IS (if other than # 4 above).		208-528-8262	
		Secretary of State use only	
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(signature required)	forms\abn form Revised 04/2003	(pe vr 1 c 1	
nted Name: Sherri Stacey	(forms) Revise		
apacity/Title: Owner	:\corp	IDAHO SECRETARY OF STAT	
(see instruction # 8 on back of form)	Car .	WW.50.5016010 05:	
(and monators a district of termy		CK: 5163 CT: 249246 BH: 1 1 0 25.00 = 25.00 ASSUM	