CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2017 SEP 11 AM 10: 17

SECRETARY OF STATE STATE OF IDAHO

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Mountain Mamas Midwifery The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):		
2.			
	Dani Boettcher White LL(Name) W/88888	(Address)	ctor, ID 83455
	(Name)	(Address) (Address)	
	(Name)	(Address)	
	The general type of busines Retail Trade Wholesale Trade Services Mailing address for future companielle Boettcher White Name PO Box 936 (Address) Victor II (City) (S	Construction Agriculture Manufacturing orrespondence:	assumed business name is: Transportation and Public Utilities Mining Finance, Insurance, and Real Estate 5. Name and address for this acknowledgment copy is (if other than #4): (Name) (Address) (City) (State) (Zipcode)
Printed Name: <u>Danielle Boettcher White</u> Signature:			Secretary of State use only
Printed Name: Signature: Printed Name:			IDAHO SECRETARY OF STATE 09/11/2017 05:00 CK:22934589513 CT:345455 BH:1602333 16 25:00 = 25:00 ASSUM NAME #3
Signature:			D 197004