



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

05 APR 12 PM 2:33

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:

PAWSABILITIES PET GROOMING

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

ANGELA WOODMAN

5365 S. VALLEY ST. BOISE, ID

83709

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:

PAWSABILITIES PET GROOMING

5365 S. VALLEY ST.

BOISE, ID 83709

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

ANGELA WOODMAN

5365 S. VALLEY ST.

BOISE, ID 83709

Signature: Angela M. Woodman
(signature required)

Printed Name: ANGELA WOODMAN

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):
376-5067

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
04/12/2005 05:00
CK: 511799 CT: 172099 BH: 804187
1 @ 25.00 = 25.00 ASSUM NAME # 2

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