



# 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.

08 NOV -7 AM 8:29  
SECRETARY OF STATE  
STATE OF IDAHO

FILED EFFECTIVE

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

Hope and Healing Books

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

LeeAnn Bonds  
Rhonda Encinas

PO Box 2005, Priest River ID 83856  
PO Box 335, Athol, ID 83801

3. The general type of business transacted under the assumed business name is:

- ☒ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☐ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☐ Finance, Insurance, and Real Estate

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

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

LeeAnn Bonds  
PO Box 2005  
Priest River ID 83856

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

Phone number (optional):

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE  
11/07/2008 05:00  
CK: 100 CT: 231245 BH: 1143501  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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