



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.

Instructions are included on back of application.

FILED EFFECTIVE

2013 MAR 12 AM 8:54
SECRETARY OF STATE

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

DONNA B at Home

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>Frontier Enterprises LLC</u>	<u>Box 810</u>
<u>(W7779)</u>	<u>McCall ID 83638</u>

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Donna B at Home
% Frontier Enterprises LLC
PO Box 810, McCall ID 83638

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

SAME
premises: 420 Wilhelm Creek Ct.
McCall 83638

Signature: Donna Bernstein

Printed Name: Donna Bernstein

Capacity/Title: owner / Mgr.

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

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03/12/2013 05:00
CK: 2118 CT: 262067 BH: 1364220
1 @ 25.00 = 25.00 ASSUM NAME # 2

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