



# 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.

2003 FEB 27 AM 8: 58

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

New Beginnings Animal Shelter

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

Kammy Rios

33713 Stark

Guadalupe Rios

907 N.W. 16<sup>th</sup> Ave

Fruitland, Id. 83619

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 type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input checked="" 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 \$20.00 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:

Kammy Rios  
907 N.W. 16<sup>th</sup> Ave  
Fruitland, Id 83619

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

Phone number (optional):

208-452-7810

Secretary of State use only

Signature: Kammy K. Rios

(signature required)

Printed Name: Kammy K. Rios

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 09/2002

IDAHO SECRETARY OF STATE  
02/27/2003 05:00  
CK: NO NUMBER CT: 158010 BH: 665448  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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