



## CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

**FILED**

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

## Destinations Consulting

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

**Name**

**Complete Address**

Julia Elzie

2788 S. Georgetown Ave, Boise, ID 83709

- 3. The general type of business transacted under the assumed business name is:**  
(mark only those that apply)

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

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

Julia Elzie

2788 S. Georgetown Ave.

Boise, Idaho 83709

Phone number (optional): (208) 362-6789

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

**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**

**Signature:**

Julia M. Elzie

**Printed Name:** U

Julia M. Elze

**Capacity:**

President

(see instruction # 8 on back of form)

**Secretary of State use only**  
IDAND SECRETARY OF STATE

04/16/1998 09:00  
OK: 1011 CT: 97421 DN: 101716

1 @ 20.00 = 20.00 ASSUM NAME

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