



# 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.**

2004 APR 13 AM 8:42  
SECRETARY OF STATE  
STATE OF IDAHO

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

Assessment & Compliance Services

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

Name

Jane Rosen

Complete Address

PO Box 3271, Hailey, ID 83333

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:

Jane Rosen

PO Box 3271

Hailey, ID 83333

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

Phone number (optional):

208-788-1900

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

(signature required)

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

Jane Rosen

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

Owner

(see instruction # 8 on back of form)

Secretary of State use only

MS-293

IDAHO SECRETARY OF STATE  
04/13/2004 05:00  
CK: 1255 CT: 150010 BH: 738924  
1 @ 25.00 = 25.00 ASSUM NAME # 2