

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

2014 OCT 30 AM 8: 44

SECRETARY OF STATE

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	of application. STATE OF IDAHO
The assumed business name which the business is:	ne undersigned use(s) in the transaction of
Silly Monkeys Childcare	
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Kimberly M. Hill	
	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed Kimbelly M. Hill 404 W. School Ave Name at 10 8368	- Secretary of State
5. Name and address for this acknowled copy is (if other than # 4 above):	lgment
	Secretary of State use only
Signature: K. HUL	IDAHO SECRETARY OF STATE
Printed Name: Kimberly M. Hill Capacity/Title: Owner	10/30/2014 05:00
Signature:	CK:1011 CT:302711 BH:14473

P174658

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

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