7	FILED EFFECTIVE
CERTIFICATE OF	
ASSUMED BUSINESS NAM	E 10 JUL 29 PM 12: 49
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business National Section 1997	
Diesse type or print legibly.	STATE OF IDAMO
NOTE: See instructions on reverse before filing.	
1. The assumed business name which the undersigned	d use(s) in the transaction of
business is:	
Susie - Q's Care	
2. The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed pusities a name	Operatoria Address
Tisson Joen 13210	Gatin last Boisc ID 83713
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Pu	blic Utilities
Wholesale Trade Construction	Submit Certificate of
Services Agriculture	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
t The name and address to which future	Idaho Secretary of State 450 N 4th Street
correspondence should be addressed.	PO Box 83720 Boise ID 83720-0080
Susie - Q's Care	(208) 334-2301
13210 Satinleat Boise TO \$3713	
5. Name and address for this acknowledgment	
5. Name and address for this control of the control of the control of the copy is (if other than # 4 above).	· · · · ·
	Secretary of State use only
- PIO	· ·
Signature: <u>Susan Lloyd</u> Printed Name: <u>Susan Lloyd</u>	
Printed Name: Susan Lloyd	
	IDAHO SECRETARY OF STATE 07/29/2010 05:00 CK: 485433 CT: 172099 BH: 1232676
(see instruction # 8 on back of form)	CK: 485433 C1: 1/2099 BH: 12360/6 1 0 25.00 = 25.00 ASSUM NAME # 2
	0141047
	NITIULI