

CERTIFICATE OF ASSUMED BUSINESS NAME

HILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

04. JUL 16 AM 9: 30

STATE OF IDAHO

	Please type or print legibly.
NOTE:	See instructions on reverse before filing.

(see instruction # 8 on back of form)

. The assumed business name which the under business is:	
2. The true name(s) and business address(es) of business under the assumed business name: Name Comprehensive Advocacy, Inc.	Complete Address 4477 Emerald Street, Suite B-100
	Boise, Idaho 83706
C56021	
	er the assumed business name is: and Public Utilities
 Wholesale Trade ✓ Services ✓ Manufacturing ✓ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Comprehensive Advocacy, Inc. 	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
4477 Emerald Street, Suite B-100	Boise ID 83720-0080 208 334-2301
Boise, Idaho 83706	200 334-2001
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt Phone number (optional): 208-336-5353
	Secretary of State use only
rinted Name: James R. Bawgh capacity/Title: Executive Director	IDAHO SECRETARY OF STATE ### ### ### ### ####################