

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 MAR 28 AM 8:5:

## Please type or print legibly. Instructions are included on back of application.

SECRE BY OF STATE OF IDAHO

Succes	ssful Students
The true name(s) and <u>business</u> address(e business under the assumed business na	ame:
<u>Name</u>	Complete Address
Tamara Purcell	2719 E. Iowa Ave.
·	Nampa, Idaho
	83686
. The general type of business transacted     Retail Trade   Transportation   Construction	ion and Public Utilities
<ul><li>✓ Services</li><li>☐ Agriculture</li><li>☐ Manufacturing</li><li>☐ Mining</li><li>☐ Finance, Insurance, and Real Estate</li></ul>	Submit Certificate of Assumed Business te Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:  Tamara Purcell	Secretary of State 450 North 4th Street PO Box 83720
2719 E. Iowa Ave.	Boise ID 83720-0080 208 334-2301
Nampa, Id 83686	
i. Name and address for this acknowledgme copy is (if other than # 4 above):	ient .
	Secretary of State use only
nature: Janara Peur coll	_
lature. Francisca / Auc ( Y Y U	
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ted Name: Tamara Purcell	-
ted Name: Tamara Purcell pacity/Title: owner / educational therapist	- IDAHO SECRETARY OF STATE
ted Name: Tamara Purcell	- 03/28/2011 05:0

ebn.pmd Rev. 07/2010

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