

Capacity/Title:___

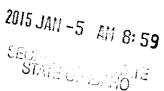
9/21/2012

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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 application.



	Othic Contained it
1. The assumed business name which the undersign	
business is:	
Diversified Bookkerping	Service
The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	e entity or individual(s) doing
Name	Complete Address
Shawnasy Marie Bennett 5	•
•	Hauden ZD 83835
3. The general type of business transacted under the ☐ Retail Trade ☐ Transportation and F ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining	
☐ Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Sharmand Bennett 539 w. Miles Houden DD 83835	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
gnature: Mumo Rewest	IDANO SECRETARY OF STATE
inted Name: Shawasy Bennett	01/05/2015 05:00
apacity/Title: Owner	CK:1468 CT:127996 BH:145541 10 25.00 = 25.00 ASSUM NAME
gnature:	
rinted Name:	7175812
anacity/Title	

abn.pmd Rev. 07/2010