

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

2016 FEB 17 AM 9: 09

	3		J. UJ
1.	The assumed business nan	ne which the undersign	SECRETARY OF STATE is:
	Walk With You	1 Birth Su	port Services
		•	.
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):		
	•		can Ave Nampa, 1083686
	(Name) f	(Address)	•
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
3	The general type of hysines	es transacted under the	assumed business name is:
V.	Retail Trade	Construction	Transportation and Public Utilities
	Wholesale Trade	Agriculture	Mining
	Services	Manufacturing	Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment		
		·	copy is (if other than # 4):
	Kimberly Harris	,	(Name)
	2469 W. Lincoln (Address)	AVE	(Address)
	Nampa II		(Nouless)
	(City) (S	itate) (Zipcode)	(City) (State) (Zipcode)
Printed Name: Kimberly L. Harris			Secretary of State use only
Signature: Mach LHwiso			IDAHO SECRETARY OF STATE
Printed Name:			02/18/2016 05:00 CK:1031 CT:158010 BH:1514136
Signature:			16 25.00 = 25.00 ASSUM NAME #2
Pri	nted Name:		N I DI I ENE
-			D184505

Rev. 08/2015