



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2017 AUG 23 PM 4:01
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Idaho Doula Associates

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):

Bolse Birth Services LLC P.O. Box 324 Meridian, ID 83680

(Name)

(Address)

(W/172330)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Idaho Doula Associates

(Name)

PO Box 324

(Address)

Meridian ID 83680

(City)

(State)

(Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name:

Soraya Mazloomi

Signature:

[Signature]

Printed Name:

Thera Jordan

Signature:

[Signature]

Printed Name:

Heather Whittaker

Signature:

[Signature]

Rev. 08/2016

Secretary of State use only

IDAHO SECRETARY OF STATE

08/23/2017 05:00

CK:14370912 CT:172099 BH:1599593

1@ 25.00 = 25.00 ASSUM NAME #2

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