



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

**FILED EFFECTIVE**

07 SEP 10 PM 1:18

SECRETARY OF STATE  
STATE OF IDAHO

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

PLEASANT VALLEY Residential CARE

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Joy Dee Cook

Complete Address

1911 17<sup>th</sup> AVE  
LEWISTON, ID  
83501

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

- |                                                              |                                                              |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |                                                              |

4. The name and address to which future correspondence should be addressed:

Joy Dee Cook  
1632 Cedar Ave  
LEWISTON, ID 83501

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 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):

SAME

Signature: Joy Dee Cook  
(signature required)

Printed Name: Joy Dee Cook

Capacity/Title: owner/operator  
(see instruction # 8 on back of form)

Secretary of State use only

D14916

IDAHO SECRETARY OF STATE  
09/11/2007 05:00  
CK: 6089 CT: 217386 BH: 1074945  
1 @ 25.00 = 25.00 ASSUM NAME # 2