



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on back of form.)

**FILED/EFFECTIVE**

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name

SEP 27 AM 8:39

SECRETARY OF STATE  
STATE OF IDAHO

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

Catalyst

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

LISA KUGEL

Complete Address

22 E Pine

Meridian ID 83642

Sole Proprietor

3. The general type of business transacted under the assumed business name is.  
(mark only those that apply)



Retail Trade



Manufacturing



Transportation and Public Utilities



Wholesale Trade



Agriculture



Finance, Insurance, and Real Estate



Services



Construction



Mining

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

Phone number (optional): \_\_\_\_\_

Catalyst

22 E Pine Ave

Meridian ID 83642

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

above

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

LISA KUGEL

Capacity: \_\_\_\_\_

OWNER

(See instruction # 8 on back of form)

Revision 1/99

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IDAHO SECRETARY OF STATE

09/27/2000 09:00  
CK: 6460 CT: 126742 BH: 351101

1 @ 20.00 = 20.00 ASSUM NAME # 2

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