



CERTIFICATE OF ASSUMED BUSINESS NAME

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

APR 26 AM 8:04

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

ISVTA Magic Valley Chapter

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

Name

Complete Address

Michelle Lewis CVT

551 3rd Ave N Twin Falls ID 83301

Judy Rockett DVM

PO Box 1238 Twin Falls ID 83301

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 | |

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Michelle Lewis CVT

551 3rd Ave N

Twin Falls, ID 83301

5. Name and address for this acknowledgment

copy is (if other than # 4 above):

Thosun Sabins

First Federal Bank

383 Shoshone St. N. Twin Falls ID

Secretary of State use only

Signature: Michelle Lewis CVT

Printed Name: Michelle Lewis CVT

Capacity/Title: President

Signature: [Signature]

Printed Name: _____

Capacity/Title: _____

IDAHO SECRETARY OF STATE
04/26/2011 05:00
CK: 23024104 CT: 250167 BM: 1270339
1 @ 25.00 = 25.00 ASSUM NAME # 2