



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

**FILED EFFECTIVE**

2018 JUN 15 AM 9:35

SECRETARY OF STATE  
STATE OF IDAHO

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

Sonny Therapy Group.

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):

LISA Honig 2209 E Packsaddle Drive CPA 83815  
(Name) (Address)

Erin Daigle 3483 E Lookout Drive CPA 83815  
(Name) (Address)

Steve Honig 2209 E Packsaddle Drive CPA 83815  
(Name) (Address)

Craig Daigle 3483 E Lookout Drive CPA 83815  
(Name) (Address)

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

☐ Retail Trade

☐ Wholesale Trade

☒ Services

☐ Construction

☐ Agriculture

☐ Manufacturing

☐ Transportation and Public Utilities

☐ Mining

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Sonny Therapy Group  
(Name)  
9030 N. Hess Street #301  
(Address)  
Hayden ID 83835  
(City) (State) (Zipcode)

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

Same  
(Name)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City) (State) (Zipcode)

Printed Name: LISA Honig

Signature: LISA Honig

Printed Name: Steve Honig

Signature: [Signature]

Printed Name: Erin Daigle

Signature: Erin Daigle

Rev. 09/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

06/15/2018 05:00

CK:1056 CT:359211 BH:1649123  
10 25.00 = 25.00 ASSUM NAME #2

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