## FILED EFFECTIVE



## 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.

(see instruction #8 on back of form)

09 JAN 26 AM 9:09

SECRETARY OF STATE STATE OF IDAHO

. The assumed business name which the undersign	ned use(s) in the transaction of
business is: MERIDIAN SENIOR CEN	TER ASSN
MERIDIAN AREA SENIOR C	HILLING ASSIN.
. The true name(s) and business address(es) of the	o ontity or individual(s) doing
business under the assumed business name:	e entity of individual(s) doing
Name	Complete Address
MERIDIAN SENIOR CENTER	P.O.BOX 606
MERIDIAN AREA SENIOR CITIZENS ASSN.	MERIDIAN, ID 83680
C57634	
The general type of business transacted under the	e assumed business name is:
Retail Trade Transportation and F	Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street PO Box 83720
•	Boise ID 83720-0080
Meridian Senior Center	(208) 334-2301
P.O. Box 606	(200) 004-2001
Meridian, Id 83680	
5. Name and address for this acknowledgment	
COPY is (if other than # 4 above):	
MERIDIAN SENIOR CENTER	
133 W. BRODOWAY	Secretary of State use only
Mesiann Id	~~~ <i>(</i>
$\mathcal{L}$	012116
nature: Sauline Oough gg	101
ted Name: Pauline Lough	THE DEPOSITABLE OF STATE
acity/Title: All Alin +	@1/26/2007 <b>@</b> 211
nature: Sauline Lough ted Name: PAU/Ne Lough pacity/Title: Alexa Lint	IDAHO SECRETARY OF STAT @1/26/2009 @5 CK: 5132 CT: 233593 BH: 1