



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

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.

02 FEB 28 AM 08:16

STATE OF IDAHO
STATE OF IDAHO

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

Winterlight Caretaking Services

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

<u>Name</u>	<u>Complete Address</u>
<u>Linda Truman-Tunis</u>	<u>Box 606 McCall Idaho 83638</u>
<u>Pat Tunis</u>	<u>Scnrl</u>
<u>Chris Weeks</u>	

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:

Linda Truman - Tunis
Box 606
McCall, Idaho 83638

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

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

Phone number (optional):

208-634-5828

Signature: Linda Truman - Tunis

Printed Name: Linda Truman - Tunis

Capacity: owner

(see instruction # 8 on back of form)

9-10cp/07/01 form 101 p65
Revised 01/2001

IDaho SECRETARY OF STATE
02/28/2002 05:00
CK: 7728 CT: 157995 BH: 449020
1 0 20.00 = 20.00 ASSUM NAME # 2

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