



2006 AUG 24 AM 8:46

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.

SECRETARY OF STATE
STATE OF IDAHO

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

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- 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

Kathi L. Burks

P.O. Box 213 Bellevue, ID 83313

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

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

Kathi Burks

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P.O. Box 213, Bellevue, ID 83313

**Submit Certificate of
Assumed Business
Name and \$25.00 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):

Signature:

Printed Name:

Capacity/Title:

Owner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
08/24/2006 05:00
CK: 1085 CT: 150010 BH: 971557
1 @ 25.00 = 25.00 ASSUM NAME # 2

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