



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.

FILED/EFFECTIVE

2002 AUG 15 AM 8:51

STATE OF IDAHO

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

Karibou Kids

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 Summers

711 East Pioneer Drive Soda Springs, ID 83270

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:

Ireland Bank ATTN: Angie

PO Box 887

Soda Springs, ID 83276

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

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

Phone number (optional):

Secretary of State use only

Signature: [Signature]

Printed Name: Michelle Summers

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 12/2001

IDAHO SECRETARY OF STATE
08/15/2002 05:00
CK: 1340 CT: 162721 BH: 482911
1 @ 20.00 = 20.00 ASSUM NAME # 2

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