

## 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.

Kemps Day CARE	
<ol> <li>The true name(s) and <u>business</u> address(es) of the business under the assumed business name: <u>Name</u></li> </ol>	e entity or individual(s) doing <u>Complete Address</u>
LoReena Billier Komp 25	Ol Lincoln ST CAldwol
3. The general type of business transacted under th	
Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed:  2501 Lincoln ST  Caldwall TO 83606  Lo Retua Billie Kemp	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	Phone number (optional):

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Printed Name: Lo Reena Balie Kome

(see instruction #8 on back of form)

Capacity/Title: Gwusk

IDAHO SECRETARY OF STATE 05/13/2002 05:00 CK: 4626 CT: 158010 BH: 465330 10 28.00 = 20.00 ASSUM NAME # 2

PLEDER

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