

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

Instructions are included on back of application.

 The assumed business name which the undersigned use(s) in the transaction of business is: Indigo Star Dog Walking Service 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Tamara Angela Callaghan 301 Iberian Way #134, Sandpoint, ID 83864 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade ■ Services Agriculture Manufacturing Mining **Assumed Business** Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future correspondence should be addressed: T. Angela Callaghan 301 Iberian Way #134 Sandpoint, ID 83864 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Signature: ///Walla Printed Name: Tamara Angela Callaghan Capacity/Title: Owner (208) 610-2593 Signature: _____

Submit Certificate of

Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE 03/06/2015 05:00 CK:1255 CT:158010 BH:1465003

10 25.00 = 25.00 ASSUM NAME #2

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Capacity/Title: __

Printed Name: