



CERTIFICATE OF ASSUMED BUSINESS NAME

10 DEC 20 10:03 AM contact # 208-597-4377

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Amanda's Pandas Childcare Center

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>Amanda Mann</u>	<u>354 Pleasant Place</u>
	<u>Moscow, ID 83843</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 | |

Submit Certificate of Assumed Business Name and \$25.00 fee to:

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

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

Amanda Mann
354 Pleasant Place
Moscow, ID 83843

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

Signature: Aman Mann

Printed Name: Amanda Mann

Capacity/Title: owner

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/20/2010 05:00
CK: 207 CT: 150810 BH: 1251693
1 @ 25.00 = 25.00 ASSUM NAME # 2

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