FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See Instructions (Notice 19) PM 4: 02

| To the SECRETARY OF STATE, STATE OF IDAHO SECRETARY OF STATE Pursuant to Section 53-504, Idaho Code, the undersigned IDAHO gives notice of adoption of an Assumed Business Name. | |
|--|---|
| 1. The assumed business name which the undersigned use(s) in the transaction of business is: Self Awareness In Leisure | |
| The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address | |
| MILES MODRE AND 10314 N. | HILLVIEW DR. |
| CAPINE MODE HAYDEN, | ID 83836 |
| | |
| 3. The general type of business transacted under the assumed business name is: (mark only those that apply) | |
| Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining | |
| 4. The name and address to which future Phone number (optional): | |
| MILES MODE | Submit Certificate of |
| A) Box 1143 | Assumed Business Name and \$20.00 fee to: |
| Haysen, 10 88835 | Secretary of State 700 West Jefferson |
| 5. Name and address for this acknowledgment | Basement West |
| CODY IS (If other than # 4 above) | PO Box 83720 |
| US BANK | Boise ID 83720-0080 208 334-2301 |
| 197 W. Prairie Ave. | Secretary of State use only |
| Hayden, 10.88835 | • |

Printed Name: MILES Capacity: OWNER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE - 67/20/20/606 05:00 CK: 862487 CT: 172099 BH: 965771 1 0 25.00 = 25.00 ASSUM MANE # 2