	CERTIFICATE OF ASSUMED BUS (Please type or print legibly. See instruction	SINESS NAME ns on reverse.)
	To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the gives notice of adoption of an Assumed Busin	undersigned STA
1.	The assumed business name which the undersigned us business is: Family & Business Services	e(s) in the transaction of
2.	2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Betty Paulsen P.O. Box Jerry Paulsen P.O. Box	nploto Addross 227 Menan, ID 83434 227 Menan, ID 83434
3.	The general type of business transacted under the assumed business name is:	
	Wholesale Trade Agriculture Fin.	insportation and Public Utilities. ance, Insurance, and Real Estate ling
4. The name and address to which future correspondence should be addressed:		r (optional): (<u>2.08) 754-883</u> 7
	P.O. Box 227 Menan, ID 83434	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (# other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	<u> </u>	Secretary of State use only
Signatu	re B. tt Pauls	No.
	Name: Betty Paulsen	
Capaci	y: Owner (see Instruction #8 on back of form)	IDAHO SECRETARY OF STATE (91/04/1999 09:00 CX: 565 CT: 188986 BH: 175886
		1 0 20.00 = 20.00 ASSIM NAME # 2

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