

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED

To the SECRETARY OF STATE, STATE OF IDAHO

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

Pathways Professional Counseling

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

TAMRA M. Krutz bus. - 307 N. 2nd Ave. Suite # 2
Sandpoint ID 83864

Home - 4750 Woodland Dr
Sandpoint ID 83864

3. The general type of business transacted under the assumed business name is:

Services (Mental health Counseling)

See categories on the reverse

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

Pathways Professional Counseling
307 N. 2nd Ave. #2 Sandpoint ID 83864

Signed

Tamra M. Krutz

By

TAMRA M. Krutz

Capacity

Proprietor

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

01/16/1998 09:00

CK: 5 CT: 92745 BH: 73655

1 @ 20.00 = 20.00 ASSUM NAME 1

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