CERTIFICATE OF ASSUMED BUSINESS NAME

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: Internally Yours			
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	<u>Name</u>			Address
	Shari Goss	Po	BOX 179 Fro	inklia ID 83237
3.	Retail Trade			
4 .	The name and address to which correspondence should be addressed: Shari Goss Pobox 179 Franklin, 1D 83237			
	Signed Unternally 45000 By Shari Good Capacity pres. / owner			
	Submit Certificate of Assumed Business Name and \$20.00 fee	to:	Customer#	
		•	I	ecretary of State use only
	Secretary of State 700 West Jefferson		Revision 10/08	IDAMO SECRETARY OF STATE DATE 05/12/1997
	PO Box 83720 Boise ID 83720-0080		stathn pm6	900 91885 2 Ck #: 1171 CUST# 81297 ASSUM NAME 18 20.00= 20.00

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