

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

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

Jun 25 | 27 PM 'OI

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRET: ATE OF THE O

 The assumed business name which the undersigned use(s) in the transaction of business is: 	
Simple Solutions	
The true name(s) and <u>business</u> address(es) business under the assumed business name <u>Name</u> Shirle J Anderson	of the entity or individual(s) doing e: Complete Address 7637 Edgebrook Dr Nampa, ID 83687
3. The general type of business transacted under the second secon	nder the assumed business name is: n and Public Utilities
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Shirle J Anderson	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
7637 Edgebrook Dr Nampa, ID 83687	208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	nent Phone number (optional): 208-463-8671
	Secretary of State use only
	- IBAHO SECRETARY OF STATE
Signature: Kuke Kenduson	/ \$ 5
Printed Name: Shirle J Anderson	IDANO SECRETARY OF STATE 46/25/2601 69:00 CX: CASH CT: 148842 BH: 464752 1 8 28.86 = 28.86 ASSUM NAME # 2
Capacity: Sole Proprietor	- Indiana 11/278
(see instruction # 8 on back of form)	1/44/00