FILED EFFECTI



	CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigne submits for filing a certificate of Assumed Business Name Please type or print legibly. NOTE: See Instructions on reverse before filing.	STAILE OF IJANO
2.	The true name(s) and business address(es) of the endersigned business under the assumed business name: Name Duane Michael White. 1344	ntity or individual(s) doing Complete Address 91 ferndele. DR Hayden. Id. 91 ferndele DR Hayden 83835
	The general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Hame away from Home Daycarc and State 1. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
	Signature: Duanc White Capacity/Title:	IDAHO SECRETARY OF STATE 94/22/2005 05:00 CK: 519970 CT: 158010 BH: 806285 1 @ 25.00 = 25.00 ASSUM NAME # 2

D 87082