

## 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.

01 M97 26 PH 3: 59

STATE OF TOAHO

Please type or print legibly.

NOTE: See instructions on reverse before filling.

Jda-Home Respite Cire & Ac	
3. The general type of business transacted under the	Complete Address  N. Maple Grove Boise TO 83704  assumed business name is:
Retail Trade Transportation and Property Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  SUSANT SANNEC  1445 N WAPIE GROUP  COUSE TO 23704	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 378-4447
	Secretary of State use only
rinted Name: Susan J. Sonner  Capacity/Title: Owner Operator  (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 11/26/2002 05:00 CK: CASH CT: 158010 BH: 648385 1 0 20.00 = 20.00 ASSUM NAME #