FKED/EFFECTIVE

SC-23-97 OZ:16P WFCU FIRST STREET 1

00 APR -7 AMIN-30

00 APR 10 PM 3:59

CERTIFICATE OF ASSUMED BUSINESS	NAME STATE OF STATE
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: Sala Harbor Counseling	
2. The true name(s) and business address(es) of the entity business under the assumed business name la/are: Cathy T Anderson 453.7 = 30	nolete Address
3. The general type of business transacted under the assumed business name is: (mark only those that exply)	
4537 E 300 N Rigby IN 8344Z	Submit Cartificate of Assumed Business Name and \$20,00 fee to: Secretary of State
Name and address for this acknowledgment copy is (if other # 4 above):	700 West Jefferson Basement West PO Eo:: 32770 Bolse ID 63720-0060 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE 04/11/2000 09:00 CK: 2889 CT: 129562 BH: 387516
Signature: Cathy anderson	CK: 2009 CT: 129562 BH: 307516 1 0 20.00 = 20.00 ASSUM NAME # 2
Printed Name: Cathy Anderson 1	7 34899
Capacity:	