Capacity/Title: //wne/

(see instruction # 8 on back of form)

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.

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersign	ed use(s) in the transaction of
business is: New Adventures in Learning	7 Preschool and Child Care
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Brenda E Lewis 7756	e entity or individual(s) doing <u>Complete Address</u>
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Brenda E. Lewis 1756 Shirrup Au. Boise ID 83709	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional):
	Secretary of State use only
Signature: Builda E Lewis Printed Name: Bunda E. Lewis	IDAHO SECRETARY OF STATE 93/31/2006 95:00 CK: CASH CT: 158010 BH: 946755 1 0 25.00 = 25.00 ASSUM NAME # 2