

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.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned business is: Layel Treatmen	
2. The true name(s) and <u>business</u> address(es) of the e business under the assumed business name: Name Tula Kerr 20	ntity or individual(s) doing Complete Address S. Strongfo base 83712
The general type of business transacted under the a	assumed business name is:
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: The Fayal Treat potent Ctr 2015 Strawban Byse TP 83712	
 Name and address for this acknowledgment copy is (if other than # 4 above): 	208-713-2421
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 67/13/2004 65:00 CK: 2466 CT: 158010 BH: 755197 1 8 25.00 = 25.00 ASSUM NAME # 2
(See Instruction # o on pack of form)	D 78178