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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B	
Please type or print legibly. NOTE: See instructions on reverse before filing. STATE	
 The assumed business name which the undersigned use(s) in the transaction of business is: 	
2. The true name(s) and <u>business</u> address(est business under the assumed business nam <u>Name</u> <u>Melinda Bigelow</u> <u>Andrew Bigelow</u>	
 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: <u>Bighear Child Care</u> <u>The 21 Colf de</u> <u>Boise</u>, <u>Id</u> <u>83209</u> 5. Name and address for this acknowledgme copy is (if other than #4 above):	and Public Utilities 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
Same as about Signature: <u>Melinda</u> Bige for andrew Bige for Printed Name: <u>melinda Bige for</u> Capacity/Title: <u>OWNERS</u> (see instruction # 8 on back of form)	Secretary of State use only IDAHO SECRETARY OF STATE 05/06/2003 05 = 00 CK: 6774 CT: 150010 BH: 678946 1 @ 25.00 = 25.00 ASSUM NAME # 2 D.J.G.J.G.J.