CERTIFICATE OF ASSUMED BUSINESS NAME

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 business is: THN'S CTILL Relief	20 PP
2.	The true name(s) and business address business under the assumed business r	s(es) of the entity or individual(s) doing 'S'
	JAN Spack MAN	Address 1358 BURTON AVE
		Burley, TD 83318 !
3.		d under the assumed business name is:
	(7) Retail Thads See categories on the reverse	
4.	4. The name and address to which correspondence should be addressed: TANS Gift Relief 40 JAN Spackman	
	1358 BURTON QUE BUR	eley, Jel 83318
	Signed	Jan Spackman
	Ву .	JAN Spackman
	Capacit	ity Clarer
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer #
	Secretary of State	Secretary of State use only
	700 West Jefferson	1000 SEDETINY OF STATE 05/20/1998 09:00
	PO Box 83720 Boise ID 83720-0080	CX: 1327 CT: 99826 M: 112466
		Med unpressure (15 / 60)