



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

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 of STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

The Children's Dream Foundation

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name
Heather McArthur

Complete Address

1731 Interlochen Way

Meridian, ID 83642

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional):

The Children's Dream Foundation

1731 Interlochen Way

Meridian, ID 83642

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only
IDAH0 SECRETARY OF STATE

07/29/1998 09:00
CK: 103 CT: 102097 DN: 132109

1 @ 20.00 = 20.00 ASSUM NAME

D17083

Signature: Heather McArthur

Printed Name: Heather McArthur

Capacity: Administrator

(see instruction # 8 on back of form)