CERTIFICATE	OF ASSU	VIED BUSINESS TRUITE	•
		MIFFE TECL	
To the SECRETARY OF STAT			
* • ······· • • - ····· · · · · · · ·	,	e undersigned gives notice of 449.	
adoption of an Assumed Busi	ness Name.	16 JAJE OF JO 16	
d other control business was	a mulaish tha sand	CALLATO 1	
	le which the unc	lersigned uses(s) in the transaction of	
business is:			
The Clear	ring lac	<u> </u>	
	<i>J</i>	of the entity or individual(s) doing	
business under the assume			
Name	eu Dusiness nam	Address	
,			-/\
Diane Eld		2122 N. 3750 E. Idaho Falls I	D
Thane Eld		Same	
			
3. The general type of busine	ss transacted und	der the assumed business name is:	
Service See categories on the reverse			
See categories on the reverse			
4. The name and address to v	vhich correspond	dence should be addressed:	
Diane Eld	_		
	1 1	THE TO COUNT	
2122 N. 3150 E	E. Idano	Falls, ID. 8340	
	Signed: Diane Elo		
	By: Diane Eld		
Capacity: Other			
	Capacity.	DRET	
Submit Certificate of Assur	méd	Customer #	
Business Name and \$20.00		Secretary of State use only	
,		,	
Secretary of State			
700 West Jefferson	y		
P.O. Box 83720			
Boise, ID 83720-0080		TRAIR PERFTANU NE ATTO	
		IDAHO SECRETARY OF STATE 92/12/2003 05:00	
		CK: 3505 CT: 158010 BH: 662478 1 8 20.00 = 20.00 ASSUM NAME # 2	2

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