

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2013 AUG 13 AM 9: 0

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

| 1. | The assumed business name which the un business is: Simply Spanish for Kids | dersigne | d use(s) in the transaction of |
|---------------|---|--|---|
| 2. | The true name(s) and <u>business</u> address(es business under the assumed business nam Name Jennifer Hildebrand | Complete Address 1049 E. Legacy View Drive, Meridian, ID 83646 Inder the assumed business name is: In and Public Utilities Submit Certificate of Assumed Business | |
| 3. | | | |
| 4. | The name and address to which future correspondence should be addressed: jennifer Hildebrand 1049 E. Legacy View Drive Meridian, ID 83646 | | Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. | Name and address for this acknowledgmen copy is (if other than # 4 above): | | |
| Signa | | | Secretary of State use only |
| Capa Signa | city/Title: Owner ture: | | IDAHO SECRETARY OF STATE 08/13/2013 05:00 CK: 9801 CT: 286381 BH: 1385777 1 8 25.88 = 25.88 ASSUM NAME # 2 |

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