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. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Elder wise	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Barbara W. Kinson	S61 Pocahontas Drive
Michael Willainson	361 Pocahontas Druie
	Hailey, ID 83333
The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade Manufacture Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
 The name and address to which future correspondence should be addressed: 	Phone number (optional): (208) 788 - 7089
Michael + Barbara Wilkinson P-0. Box 2724	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Letchum, LD 83340 5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson ent Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE
Signature Barbara Wilkinson	IDAHO SECRETARY OF STATE 69/15/1999 69:00 CK: 9316 CT: 120524 BH: 249986
Printed Name Barbara Wilkinson	1 @ 20.00 = 20.00 ASSUM NAME # 2
Capacity: administrator /owner	D 29201

(see instruction # 8 on back of form)