3412 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 undersigned use(s) in the transaction of business is: Lifeline Personal Services 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: ray _____ TIS Friday Ave., Mullan, ID Gray 718 Friday Ave., Mullan ID 3. The general type of business transacted under the assumed business name is: <u>9. Services: CPR and First Aid Training, Bookkeeping,</u> See categories on the reverse Secretarial, Notary Public, Temporary Office Help 4. The name and address to which correspondence should be addressed: P.O. Box 564 Mullan ID 83846 Sianed Бγ Capacity On - Awner Submit Certificate of Assumed Customer# Business Name and \$20.00 fee to: Secretary of State use only Secretary of State IDAHO SECRETARY OF STATE DATE 04/15/1997 700 West Jefferson Revision 0900 82975 2 PO Box 83720 CK #: 170 0674 Boise ID 83720-0080 ASSUM NAME 19 20.00= 20.00 Vorms\abn D