CERTIFICATE OF ASSUMED BUSINESS NAME

	the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idaho Ioption of an Assumed Business Name	o Code, the undersigned gives notice of
1.	The assumed business name which to business is:	the undersigned use(s) in the transaction of
2.	The true name(s) and business address business under the assumed business	ess(es) of the entity or individual(s) doing as name is/are:
	Vivian Mame	311 n. 15 th a. H
3.	The general type of business transac	ted under the assumed business name is:
	9 conitorial C See categories on the reverse	leaning service
4.	1. The name and address to which correspondence should be addressed: Divian Nagu 3/1 n. 15 that Caldwell Id.	
		ed Vicion Reagle
Capacity Diono		
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer#
	Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	Secretary of State use only IDAHO SECRETARY OF STATE DATE 04/02/1997 0900 78886 2 OX 1: 18102564 CUSTA 79183 RESUM NAME 18 20.00= 20.00