	CERTIFICATE OF ASSUM (Please type or print legibly. Se	MED BUSINESS NAME See instructions on reverse	
	To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah gives notice of adoption of an As	aho Code, the undersigned 44 o.	
1.	The assumed business name which the und business is:	ndersigned use(s) in the transaction A	
	Champion's Group	· **	
2.	2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Name Amazing Grace Fellowship Inc 10	Complete Address 83301 1061 Eastland Dr N. Twin Falls, ID	
	c91315		
3.	The general type of business transacted un- (mark only those that apply)	inder the assumed business name is:	
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate Mining	
4.	The name and address to which future Placerrespondence should be addressed:	Phone number (optional): (208) 736-0727	
	Amazing Grace Fellowship Inc	Submit Certificate of	
	1061 Eastland Dr N	Assumed _k Business Name and \$20.00 fee to:	
5	Twin Falls, ID 83301 Name and address for this acknowledgmen	Secretary of State 700 West Jefferson Basement West	
	COpy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301	
		Secretary of State use only	
		19040 SECRETARY OF STATE 91/25/2000 09:00 CK: 10911 CT: 10070 BH: 204170	
Signatu	ure:		
Printed	Name: Rev. Lynn J. Schaal	1 @ 26.68 = 28.88 ASSUM WANE 1 2	
Capacity: President		10 32416	
- MPP T	(see instruction # 8 on back of form)	B you'd	