

CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 JUL 31 AM # 27

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

| Spiritual Life Source | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| P. The true name(s) and business address(es) business under the assumed business name Name Karen Post | |
| . The general type of business transacted und | der the assumed business name is: |
| Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Karen Post 602 E Sunrise Dr. Coeur d'Alene, Idaho 83815 5. Name and address for this acknowledgment copy is (if other than #4 above): | Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301 |
| | Secretary of State use only |
| nature: Karen Post nted Name: Karen Post pacity/Title: Owner | IDAHO SECRETARY OF STATE ### Propried CK: 975 CT: 228371 BH: 1129: 1 8 25.00 = 25.00 ASSUM NAME |