

CERTIFICATE OF ASSUMED BUSINESS NAME

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FILED EFFECTIVE

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

GELLER OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

Capacity/Title: OWNER

(see instruction # 8 on back of form)

 The assumed business name which the under business is: \(\begin{align*} FRESH START HOM \\	of the entity or individual(s) doing Complete Address
3. The general type of business transacted un Retail Trade Wholesale Trade Services Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: MICHAEL W. MILLWARD 3061 S. TAGISH WAY MERIDIAN Name and address for this acknowledged copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: Michael W. Millward Printed Name: MICHAEL W. MILLWA	Secretary of State use only IDAHO SECRETARY OF STATE O1/13/2006 05:06 CK: CASH CT: 158010 BH: 93198 1 @ 25.80 = 25.90 ASSUM NAME

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