FILED/EFFECTIVE

055184

CERTIFICATE OF ASSUMED BUSINESS NAME AM 8: 54

To the SECRETARY	OF STATE,	STATE	OF IDAHO
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SECRETARY OF STATE STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

 The assumed business name which the under business is: 	signed use(s) in the transaction of
C&H Consulting Se	
The true name(s) and business address(es) of under the assumed business name is/are:	the entity or individual(s) doing business
Name	- Address
Cachary Hirsch	820 Campus Dr. Twin Fal
	820 Campus Dr. Twin Fal ID, 83301
3. The general type of business transacted under	the assumed business name is:
Sales / Retail Tre	Le
See categories on the reverse	
4. The name and address to which corresponden	ce should be addressed:
CEH Consulting Serv 820 Campus Dr. Juin F	ices
Sign	alls, TD 83301
By	musey Ansch
Capa	acity Owner
Submit Certificate of Assumed	Customer #
Business name and \$20.00 fee to:	
Secretary of State	Secretary of State use only
700 West Jefferson	•
PO Box 83720 Boise ID 83720-0080	
JOISC 117 63 /20-0000	
	IDAHO SECRETARY OF STATE
	05/23/2002 05:00 CK: 203970 CT: 158010 BH: 467482 1 0 20.00 = 20.00 ASSUM NAME # 2