CEI	RIIFICATE OF ASSUMED E (Please type or print legibly. See instru			
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name ETARY OF STATE OF IDAHO				
1.	1. The assumed business name which the undersigned use(s) in the transaction of business is:			
2.	he true name(s) and business address(es) of the entity or individual(s) doing usiness under the assumed business name is/are:			
	Ruth Cecilia Fritz	Complete Address 9900 MCMIllan Rd. B	83704	
3.	3. The general type of business transacted under the assumed business name is: (mark only those that apply)			
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Finance, Insurance, a	l,	
•	e	e Phone number (optional): 377 - 3404		
	FRITZ CREATIVE SERVICES RUTH CECILIA FRITZ 9900 MCMILIAN RD BOISE ID 83704	Submit Certificate Assumed Busines Name and \$20.00	3	
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferso Basement West PO Box 83720 Boise ID 83720-00 208 334-2301		
		Secretary of State us	e only	
Signature: Puth Dit		IDANO SECRETARY OF STATE 26/29/1999 69:00 CX: none CT: 117387 9H: 229566		
Printed	Name: Ruth Fritz	9 1 9 28.06 = 29.06	ASSUM NAME II 2	
Capacity: owner			43	
	(see instruction # 8 on back of form)	duca;		