## CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of ATE adoption of an Assumed Business Name.	
1. The assumed business name which the undersigned use(s) in the transaction of business is:  My House Two Daycare   Output  My House Two Daycare   Output  Description:	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Kathy Amerson	Address 410 E Edgar Ct
(Kathleen)	Meridian ID 83642
3. The general type of business transacted under the assumed business name is:  Services  See categories on the reverse	
4. The name and address to which correspondence should be addressed:  Kathy Anderson 410 E Edgar Ct  Meridian 10 83642	
Signed <sub>e</sub>	KATHY ANDERSON
Capacity Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer# IDAHO SECRETARY OF STATE DATE 01/23/1997 0900 57599
Secretary of State 700 West Jefferson PO Box 83720	Secretary of States of STA 75303  BE ASSUM NAME  1 = 20.00= 20.00
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