CERTIFICATE OF AS	SSUMED BUSINESS NAME I AMIN
To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah adoption of an Assumed Business Nam	E OF IDAHGEERETARY OF STATE SECRET
 The assumed business name which business is: 	the undersigned use(s) in the transaction of
The Business Scri	be
The true name(s) and business address under the assumed business	ess(es) of the entity or individual(s) doing
Dianna Wiebe	Adden
John Wiebe	P.O. BOX (652 Troy ID 83871 P.O. BOX 652 Troy ID 83871
2 7	— ———— I:I
3. The general type of business transact	ed under the assumed business name is:
Business Consulting See categories on the reverse	
4. The name and address to which corres The Business Scribe P.O. Box 652 Troy	spondence should be addressed: ID 83871
Signe	diarna Wiete
Ву	_ Owner
Capac	ity Owner
Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer #
Secretary of State	\$ 07/82/1998* @9 : 00 : 00 : 00 : 00 : 00 : 00 : 00 :
700 West Jefferson PO Box 83720	CK.1 6906 CT1 90400 SR: 124027
Boise ID 83720-0080	
TELEPHONE: 208 345-9126	D16394