## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Bu	usiness Name.
1. The assumed business name which the undersigned	use(s) in the transaction of
business is:	86
ESSENCE of homa	nce by the hoca
	150 1000
2. The true name(s) and business address(es) of the er	ntity or individual(s) doing
business under the assumed business name is/are:	
<u>Name</u>	Complete Address Mark de
Vetera C moduren 1460	N Pensith Ave EsG
3. The general type of business transacted under the as	Scumod hucinoog name is:
(mark only those that apply)	ssumed business name is.
** - · · · · · · · · · · · · · · · · · ·	
	Transportation and Public Utilities
	Finance, Insurance, and Real Estat
Services Construction	Mining
4. The name and address to which future Phone num	
correspondence should be addressed:	iber (optional):
$\sim 10^{-3}$	
Debora modaren	Submit Certificate of
KIOON Penrith Ave	Assumed Business
	Name and \$20.00 fee to:
Meridian, ID 83642	Secretary of State
5. Name and address for this sales at the	700 West Jefferson
5. Name and address for this acknowledgment	Basement West
COPY is (if other than # 4 above):	PO Box 83720
	Boise ID 83720-0080 208 334-2301
	200 00 / 200 /
	Secretary of State use only IDAHO SECRETARY OF STATE
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a hac m D	<b>08/11/2000 09:00</b> CK: CASH CT: 134692 BH: 340663
nature: Por a Tricy (onco) 12	1 0 20.00 = 20.00 ASSUM NAME # 2
ted Name: Debora Mcdosen 8	
pacity:	
(see instruction # 8 on back of form)	738141
Face managasia a on back of form)	V / VIII