(Please type or print legibly)		egibly)
	To the SECRETARY OF STATE, STATE C Pursuant to Section 53-504, Idaho C gives notice of adoption of an Assun	OF IDAHO Code, the undersigned STATE OF 16 STATE
	business is:	undersigned use(s) in the transaction of
	LIVE WELL MARKETING	
	<ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li> </ol>	
	<u>Name</u>	Complete Address
	SAMUEL K. CRANE	476 E 800 375 E 1035 LNN
	DAWN M. CRANE	RUPERT, IDAHO 83350
TATE:	3. The general type of business transacted (mark only those that apply)	under the assumed business name is:
mange g	Retail Trade	Finance, Insurance, and Real Estate
	The name and address to which future correspondence should be addressed:	·
	476 EAST 800 N	Submit Certificate of Assumed Business
	RUPERT, ID 83350	Name and <b>\$20.00</b> fee to:
	5. Name and address for this acknowledgme	Gecretary of State 700 West Jefferson Basement West PO Box 83720
ı	COpy is (if other than # 4 above):	Boise ID 83720-0080 208 334-2301
	375 EAST 1035 LN N	SERVING SERVEZY UND CHECKANA
	RUPERT, ID 83350	12/19/2000 09:00 CK: 1076 CT: 139767 BH: 367462
	Signature: <u>Jamuel K-lovane</u>	1 P 20.80 = 28.00 ASSUM HAME # 2
	Printed Name: <u>Samuel K. (RANE</u> Capacity: <u>(OWNER MANAGER)</u>	D 41259
	(see instruction # 8 on back of form)	D 41259
		-