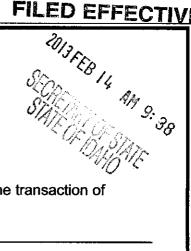


CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. Instructions are included on back of application.



The assumed business name which the business is:	undersigned use(s) in the transaction of
Amaysing Grace	
The true name(s) and <u>business</u> addres business under the assumed business <u>Name</u> Allie Mays	name: <u>Complete Address</u> 2640 Freeland Dr.
	Coeur d'Alene, ld 83815
Retail Trade Transporta Wholesale Trade Construct	
Services Agricultur Manufacturing Mining Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Allie Mays 2640 Freeland Dr	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Coeur d'Alene, ID 83815	200 334-2301
5. Name and address for this acknowledg copy is (if other than # 4 above):	ment
Signature: Muse Mays	Secretary of State use only
Printed Name: Allie Mays	_
Capacity/Title: Owner	
Signature:	
Printed Name:	IDAHO SECRETARY OF STATE 02/14/2013 05:00
Capacity/Title:	CK: 1286756 CT: 172099 BH: 1360281

1)161019