



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED
APR 30 9 35 AM '01
RECEIVED
IDAHO SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Ivy Pointe Residence

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Terese Sackos

Complete Address

4820 Bitterbrush Dr, Boise Id
83703

1301 N 25th St. Boise, Id
83702

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

Terese Sackos

4820 Bitterbrush Dr

Boise, Id 83703

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

Signature:

Terese Sackos

Printed Name: Terese Sackos

Capacity: Owner

(see instruction # 8 on back of form)

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Revised 01/2001

Secretary of State use only
IDAHO SECRETARY OF STATE
04/30/2001 09:00
CK: 1721 CT: 120198 BH: 394843
1 E 20.00 = 20.00 ASSUM NAME # 2

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