

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2006 OCT 12 AM 9:43

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Health Education Services

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

Name

Complete Address

C.C.'S VENTURES LLC

1320 S. Mt View Rd Moscow, ID 83843

same

same

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



Retail Trade



Transportation and Public Utilities



Wholesale Trade



Construction



Services



Agriculture



Manufacturing



Mining



Finance, Insurance, and Real Estate

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

Dale Coryell

1320 S. Mt View Rd Moscow, ID 83843

Submit Certificate of Assumed Business Name and \$25.00 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):

Same as Above

Phone number (optional):

208-882-2868

Signature: [Signature]

(signature required)

Printed Name: Dale Coryell

Capacity/Title: President

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
10/12/2006 05:00
CK: 935665 CT: 172099 BH: 979831
1 @ 25.00 = 25.00 ASSUM NAME # 5

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