

FILED

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

98 SEP -4 AM 10:44
SECRETARY OF STATE
STATE OF IDAHO

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

"Helping Hands" Domestic Services

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

Name	Address
<u>Lynda E. Larson</u>	<u>1900 W QUINN #137</u>
	<u>POCAHELLO IDAHO 83202</u>

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

SERVICES

See categories on the reverse

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

Lynda Larson
1900 W QUINN #137 POCAHELLO IDAHO 83202

Signed Lynda E. Larson

By _____

Capacity President / owner

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

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

SECRETARY OF STATE

09/04/1998 09:00
CX: 3848 CT: 183681 BH: 142674

1 @ 20.00 = 20.00 ASSUM NAME

Revision 1055

SECRETARY OF STATE

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