

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.

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

Tend Your Toes

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
Julia A. Jacobs	108 S. 850 W., Paul, Id. 83347

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:

Tend Your Toes

108 S. 850 W. Paul Id. 83347

Signed

Julia A. Jacobs

By

Capacity Owner/Operator

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 use only

IDAHO SECRETARY OF STATE

DATE 05/14/1997

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CK #: 1421 CUST# 81397

ASSUM NAME	1e	20.00=	20.00
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