

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



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 uses in the transaction of
business is:

FILED/EFFECTIVE
01 MAY 24 AM 8:54

ARTLAN COUNSELING & TESTIMONY SERVICES
SECRETARY OF STATE
STATE OF IDAHO

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	Complete Address
<u>JOHN W. MORGAN</u>	<u>708 MAIN, SUITE C CALDWELL 83605</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): 455-9165

JOHN W. MORGAN, Ed.D.
708 MAIN, SUITE C
Caldwell Id. 83605

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):

Signature: John W. Morgan, Ed.D.
Printed Name: JOHN W. MORGAN, Ed.D.
Capacity: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

05/24/2001 09:00
CK: 1400 CT: 89298 DR: 399126

1 @ 20.00 = 20.00 ASSUM NAME # 2

045-571

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