CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

1. i	The assumed business name which the undersigned use(s) in the transaction business is: Write Offsite Publishing 6		
-	Write Offsite Publishing Services		
2. 1 b	The true name(s) and business address(ousiness under the assumed business na <u>Name</u>	es) of the e ame is/are:	**************************************
	Joyce C. Nowacki	15155	
			rum, Idaho 83858
3. Ti	he general type of business transacted to mark only those that apoly?		
X	Retail Trade Manufacturir Wholesale Trade Agriculture Services Construction		Transportation and Public Utilities Finance, Insurance, and Real Esta Mining
. Th	The name and address to which future Phone number (optional): 208-687-5177 correspondence should be addressed:		
_	Joyce Nowacki / Write Offsite		
	15155 West Stub Avenue		Submit Certificate of Assumed Business
	Rathdrum, Idaho 83858		Name and \$20.00 fee to:
Na cor	ame and address for this acknowledgmer py is (if other than # 4 above):	nt	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
			Segnandysechemoly attate

Printed Name: Joyce Nowacki

Capacity: Owner/manager

(see instruction # 8 on back of form)

1 8 20.00 = 20.00 ASSUM HAME

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