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

	To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah gives notice of adoption of an As	ho Code, the undersigned
1.	The assumed business name which the und	ndersigned use(s) in the transaction of
	business is:  Final Wishes	S. 0
	TIME WISHES	
2.	The true name(s) and business address(es) business under the assumed business name	•
	Lesleigh J. Dwen 4	Complete Address 1879 W. Sheila Un, #102, Boise, ID 83705
	Laun J. Owen 2	201 S. Grays Lane, Nampa, ID 8687
	Peter Wollheim -	01 9. Evays Lave, Nampa, ID 83687
3.	The general type of business transacted un (mark only those that apply)	nder the assumed business name is:
	☐ Retail Trade       ☐ Manufacturing         ☐ Wholesale Trade       ☐ Agriculture         ☒ Services       ☐ Construction	g Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:	Phone number (optional):
	Laun J. Owen	Submit Certificate of
	201 S. Grays lane	Assumed Business
	Nama Idaho 88487-8827	Name and \$20.00 fee to:
	Nampa, Idaho 88187-8827	Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgmen	nt Basement West
	COPY is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080
		208 334-2301
		Secretary of State use only
		IDANO SECRETARY OF STATE  5 05/04/1999 09:00  CX: 2769 CT: 114986 BH: 213487
Signatu	ire: Tawi S. MCM	5110 624191
Printed Name:		
Capacity:		
	(see instruction # 8 on back of form)	