CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2004 SEP 23 AM 9: 38

STATE OF TOAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

NOTE: See instructions on reverse being	ore ming.
 The assumed business name which the undersigned use(s) in the transaction of business is: 	
Independent L	iving Solutions
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address	
Christina Bodily	,
Chilsting Usarry	1810 W. State Box 228 Boise, ID 8370Z
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade Transportation and Public Utilities Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
1810 W. State Barzza	Basement West PO Box 83720
Buse 10 92707	Boise ID 83720-0080
	208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional):
_same	
	Secretary of State use only
Signature: Christian Brodicy	IDAHO SECRETARY OF STATE 99/23/2004 05 = 00 CK: 1479 CT: 158818 BH: 767639
Printed Name: Christina Bodily	IDAHO SECRETARY OF STATE
Capacity/Title: Owner	IDAMO SECRETARY OF STATE 99/23/2004 05:00
(see instruction # 8 on back of form)	CK: 1479 CT: 158810 BH: 767639 1 9 25.00 = 25.00 ASSUM MANE #