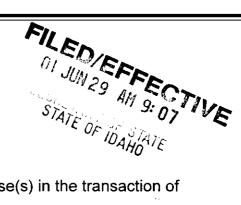


## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.



	10
The assumed business name which the up business is:	ndersigned use(s) in the transaction of
_Cornerstone Children's	s Center
2. The true name(s) and <u>business</u> address(establishess under the assumed business name Name  Lisa K. Tsaak  Jeffrey L. Tsaak	ne: <u>Complete Address</u>
3. The general type of business transacted u	under the assumed business name is:
Retail Trade	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
	Secretary of State use only
	IDANG SECRETARY OF STATE
Signature: Kusa K Assak	CK: 2756 CT: 148228 BH: 485618
Printed Name: Lisa K. Tsaak	New ised 01/2001  Revised 01/2001  1 # 20.00 = 20.00 ASSIM NAME # 2
	CX: 2756 CT: 148228 BH: 485618  1 8 20.80 = 29.80 ASSUM NAME # 2
Capacity: <u>Owner</u>	), ,

(see instruction #8 on back of form)