

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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.

98 MAY 22 AM 9:00
SECRETARY OF STATE
STATE OF IDAHO



1. The assumed business name which the undersigned use(s) in the transaction of business is:

Healthy Horizons

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

Sandra Joy Heckathorn 1101 Heckathorn Pl. Nampa 83686
James R. Heckathorn 1101 Heckathorn Pl. Nampa 83686

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

<input checked="" 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 type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Sandra J. Heckathorn
1101 Heckathorn Place
Nampa, ID 83686-2848

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Same as above

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

Signature:

Sandra J. Heckathorn

Printed Name:

Sandra J. Heckathorn

Capacity:

General Partner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

05/22/1998 09:00
CX: 22193 CT: 45000 IN: 113019

1 @ 20.00 = 20.00 ASSUM NAME

D15234

Revision 2/87

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