

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 AUG -4 AM 8: 32

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

business is:	lelp You With That!
2. The true name(s) and business address business under the assumed business n	s(es) of the entity or individual(s) doing name:
Rebecca Sue Veit-Holt	Complete Address 5282 Lindee Lane, Ammon, ID 83401
3. The general type of business transacted	d under the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business
<ol> <li>Name and address for this acknowledged copy is (if other than #4 above).</li> </ol>	gment
	Secretary of State use only
nature: All Manager Substitute required)  nted Name: Rebecca Sue Veit-Holt	Social forms and
pacity/Title: Owner	IDAHO SECRETARY OF STATE
(see instruction # 8 on back of form)	90/04/2009 05

IDAHO SECRETARY OF STATE

28/04/2008 05:00

CK: 139864 CT: 172899 BH: 1138079

1 8 25.08 = 25.00 ASSUM NAME # 2