227

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

97 SEP 18 AM 8:26

SECRETARY OF STATE
STATE OF IDAHO

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

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

Catalyst Counseling for Change

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
Rodney D Limb	1792 Glenway Ave Fruitland, ID 83619
Dixie L. Limb	" "

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

[ ] Retail Trade	[ ] Manufacturing	[ ] Transportation and Public Utilities
[ ] Wholesale Trade	[ ] Agriculture	[ ] Finance, Insurance, and Real Estate
[X] Services	[ ] Construction	[ ] Mining

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

Catalyst Counseling for Change
1792 Glenway Ave
Fruitland, ID 83619

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

Signature: Dixie L Limb

Printed Name: Dixie L. Limb

Capacity: general partner
(see instruction # 8 on back of form)

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
IDAHO SECRETARY OF STATE
09/18/1997 09:00
CK: 5093 CT: 87315 BH: 39469
1 @ 20.00 = 20.00 ASSUM NAME

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