

## 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

12 JAN -4 PM 3: 36

STATE OF IDAHO

Please type or print legibly.
Instructions are included on back of application.

<ol> <li>The assumed business name which the up business is:</li> </ol>	
Problem Solver	Process Servers
2. The true name(s) and <u>business</u> address(e business under the assumed business name  Name  Life 15 Good Inc  (C188) 15	· · · · · · · · · · · · · · · · · · ·
Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  Patty Reu  3 N. Midland Blvd	Secretary of State 450 North 4th Street PO Box 83720
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
Signature: atria 18	Secretary of State use only
Printed Name: Patricia Bell home  Capacity/Title: Pres  Printed Name:	IDAND SECRETARY OF STATE  @1/@4/2012 @5:00  CK: 869317 CT: 172099 BH: 1304496 1 @ 25.00 = 25.00 ASSUM MANE # 2
Capacity/Title:	D152294