CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2006 APR 24 AM 9:29

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

Alcohol & Drug Counseling Services

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
GRETCHEN STEEN	1710 North Boyer
	Sandpoint, ID. 83864

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade
- ☐ Wholesale Trade
- ☒ Services
- ☐ Manufacturing
- ☐ Finance, Insurance, and Real Estate
- ☐ Transportation and Public Utilities
- ☐ Construction
- ☐ Agriculture
- ☐ Mining

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

GRETCHEN STEEN
P.O. BOX 1399
Sandpoint, ID. 83864

Submit Certificate of Assumed Business Name and $25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

208-255-9333

Secretary of State use only

Signature: [signature]
(signature required)

Printed Name: GRETCHEN STEEN

Capacity/title: OWNER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
04/24/2006 05:00
CK: 2535 CT: 199535 BH: 950827
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 99069