CERTIFICATE OF ASSUMED BUSINESS NAME

	the SECRETARY OF STATE, S' Pursuant to Section 53-504, option of an Assumed Business N	tho Code, the undersigned give	es notice of
1.	The assumed business name will business is:		
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 Address		
	<u>Name</u> Kadadhalils	Sole Boiles Do	ess Her Land TJ 8330
	Johanna Wills	506 Bailey Dr. Hey	James, Td. 83336
3.	The general type of business transacted under the assumed business name is: $ \leq e_{\text{CVLCRS}} $		
	See categories on the reverse		
4.	1. The name and address to which correspondence should be addressed: 506 Bailey Drive Heybran, Idaho 83336		
		gned <u>Select Will</u> apacity <u>Persident</u>	00
	Submit Certificate of Assumed Business Name and \$20.00 fee	Customer#	
		i	y of State use only
	Secretary of State	Revision 10/29	
	700 West Jefferson PO Box 83720	eviva:	IDANO SECRETARY OF STATE ATE 01/30/1997 0900 59749
	Boise ID 83720-0080	2	
		1 @	K #: 501 CUST# 75746 ASSUM NAME 20.00= 20.00

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