## CERTIFICATE OF ASSUMED BUSINESS NAME

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 Name.

۱.	The assumed business name which the undersigned use(s) in the transaction of business is:
	POSSIBILITIES
•	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
	RESECCA KIRKDATRICK 2770 E. DRIFT WOOD DA
	REBECCA KIRKPATRICK 2770 E. DRIFT WOOD DR.  COEUR DI ALENE, I D
	<u>83814</u>
	The general type of business transacted under the assumed business name is:
	9. Services
	See categories on the reverse
r	The name and address to which correspondence should be addressed:  1055/B/C/TES  1770 E. DRIFT WOOD DR.
	COEUR d'ALENE, ID 83814
	Signed Robert Kirlpatrick
	Ву
	Capacity <u>OWNER</u>
	mit Certificate of Assumed iness Name and \$20.00 fee to:

Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080