

Signature:__

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25,00.

FILED EFFECTIVE

2016 NOV 17 AM 9:43

SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Designs For Life The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):		
2.			
	Dori Topholm		Twin Falls, ID 83301
	(Name)	ivancest	
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
3.	The general type of business transacted under the assumed business name is:		
	☒ Retail Trade☒ Wholesale Trade☒ Services	Construction Agriculture Manufacturing	Transportation and Public UtilitiesMiningFinance, Insurance, and Real Estate
4.	Mailing address for future	: correspondence:	 Name and address for this acknowledgment COpy is (if other than # 4):
	Dori Topholm		
	(Name) 2913 E 3600 N #83		(ivaine)
	(Address)		(Address)
	Twin Falls, ID 83301 (City)	(State) (Zipcode)	(City) (State) (Zipcode)
Pri	nted Name: Dori Topholm		Secretary of State use only
Sid	gnature:	PLLOUM	
Printed Name:			10AHO SECRETARY OF STATE 11/17/2016 05:00
			CK:1358 CT:158010 BH:1555749
Sig	gnature:		16 25.00 = 25.00 ASSUM NAME #2
Pri	nted Name:		N/0 1/3
Sic	inature:		1 0190460