

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.

Please type or print legibly.

Instructions are included on back of application.

SEGRE BY OF STATE STATE OF IDAHO

The assumed business name which the undersign	ed use(s) in the transaction of
business is: Essential Solutions SK	incare
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Deharah Jane He (ann por	entity or individual(s) doing Complete Address EX 1922, Bonners Ferry, TA
3. The general type of business transacted under the Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: Po Bax 1822 Banners Fury TO 83805	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Leboroh Dans Mc Can Printed Name: Debooah Mc Can	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE ビングタイプの11 はちょのほ CK: 710 CT: 158016 BH: 1258543 1 0 25.00 = 25.00 ASSUM NAME # 2
Printed Name: Capacity/Title:	D145085

abn.pmd Rev. 07/2010