## CERTIFICATE OF ASSUMED BUSINESS NAME

	To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-504, Idaho Code, to adoption of an Assumed Business Name.	HO ne undersigned gives notice of
	The assumed business name which the under business is:  HARVEST LIFE CHO	TO DATE OF
2.	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	
	Name	<u>Address</u>
- ;··.	The real control 2:	13 SUNDANCE PD
	HARVEST LIFE MINISTRIES A	AMPA, 10AHO 83651
	(C10(149)	·
		4
3.	The general type of business transacted under the assumed business name is:	
	See categories on the reverse	
4. The name and address to which correspondence should be addressed:  DAUID WHALEY		
	25/3 SUNDANCE RD,	NAMPA ID 83651
	Signed	buil Wholey
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	tomer#
	Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	IDAHO SECRETARY OF STATE  10/13/2006 05 = 00  CK: 3285 CT: 205409 BH: 979990 1 8 25.00 = 25.00 ASSUM MAME # 2

D104609