CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on recerse.)			
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			
1.	The assumed business name which the und business is: Heather Lovelands	14.	44611
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address			
	Hearther Loveland	1700 Ta Burky	KKY Ave , ID 83318
3.	The general type of business transacted un	der the assu	med business name is:
	Retail Trade	Fina	nsportation and Public Utilities ance, Insurance, and Real Estate aing
4.	The name and address to which future P correspondence should be addressed:	hone number	(optional):
	Same as above		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above): Same as above	it	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	1	78	Secretary of State use only
Signat	ure: MUM Soveland	Revision	051547
Printed Name: //tal//tr///////////////////////////////			
Capacity: Oll MeV (see instruction # 8 on back of form)			CK: 224 CT: 156326 BH: 442422 1 0 20.00 = 20.00 ASSUM NAME # 2