CERTIFICATE (Please type	E OF ASSUMED Be or print legibly. See instruc	USINESS NAME (Control of the control	
To the SECRETARY Pursuant to S gives notice o	OF STATE, STATE OF IDA section 53-504, Idaho Code, of adoption of an Assumed B	AHO the undersigned susiness Name. d use(s) in the transaction of	The
The assumed business results business is:	name which the undersigned Mes Pet Sittir	d use(s) in the transaction of	
	usiness address(es) of the elumed business name is/are:	ntity or individual(s) doing	
Karen James	1095 5. 5	Complete Address 39 10 B Mtn. Home ID.	
William Jame	6 Jones 5 3	350 W B Mm. Home ID 8 3647	7
3. The general type of busing (mark only those that apply) Retail Trade Wholesale Trade Services	iness transacted under the a Manufacturing Agriculture Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining	
4. The name and address to correspondence should be Karen James 1095 S. 3rd W. Mtn. Home, J. 5. Name and address for the copy is (if other than #4 above):	be addressed: B Street D 831/47 his acknowledgment	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
Signature: KWEN To Capacity: 5 W Ner (see instruction # 8 on back)	ames god in the specific of th	Secretary of State use only IDAHO SECRETARY OF STATE OB/22/2000 09:00 CK: 2986 CT: 135869 BH: 342948 1 8 26.08 = 20.00 ASSUM NAME # 2	