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CERTIFICATE OF 07 NOV 16 AM 11:44 **ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing.

:	business is: HELP Inc. Exchang	Club CAP Center	
2.	The true name(s) and business address(es) business under the assumed business name Name HELP, Inc.	of the entity or individual(Complete Addre 1465 Hoopes Av	ess
÷ .	idaho Falls, ida		83404
3.	The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction	er the assumed business and Public Utilities	name is:
	Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certifica Assumed Busin Name and \$25.	ness 00 fee to:
	The name and address to which future correspondence should be addressed: HELP, Inc.	Idaho Secretary 450 N 4th Street PO Box 83720 Bolse ID 83720-0	
	1465 Hoopes Avenue	(208) 334-2301	
	Idaho Falis, Idaho 83404		
5 .	Name and address for this acknowledgmen copy is (frother than \$ 4 shove):		
			
		Secretary of	State use only
Sionati	ure: Show	Secretary of	State use only
Signatu	ure: Sugustic Charp (nigrature required) Lynette Sharp	with featral manual page of the common page of the	State use only O SECRETARY OF STATE

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