## 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.

NOTE: See instructions on reverse before filing.

CEO

(see Instruction #8 on back of form)

Capacity/Title:

10 FEB 25 AM 8: 25

The assumed business name which the undersigned	SECRETARY OF STATE
business is: Seasons of Hope	STATE OF IDAHO
2. The true name(s) and business address(es) of the e business under the assumed business name:  Name  Heath Sommer - Sole 703  Proprietor Chuk	Complete Address  Bonanza Aue,
3. The general type of business transacted under the a	ssumed business name is:
Retail Trade Transportation and Public Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Hank Somme M.D.  Chick Executive of Security 93200	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this acknowledgment copy is (if other than # 4 above):</li></ol>	Phone number (optional):
-Same	Secretary of State use only
Signature: (Signature required)  Printed Name: Hearth Som Mer Printed	

10AHO SECRETARY OF STATE 02/25/2010 05:00 CK: 1402 CT: 156010 BH: 1209669 1 0 25.00 = 25.00 ASSUM MAME #