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CERTIFICATE OF ASSUMED E	
To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Cogives notice of adoption of an Assume	FIDAHO STATE OF IDA ode, the undersigned
1. The assumed business name which the ubusiness is: **NAVELRING.Com**	undersigned use(s) in the transaction of
The true name(s) and business address(e business under the assumed business name Name	, , , ,
CORY WOLFLEY	930 CHERRY HILL DR. BOX 36/2
	HANEY 10 83333
3. The general type of business transacted (mark only those that apply) A Retail Trade	ing Transportation and Public Utilities Finance, Insurance, and Real Estate
correspondence should be addressed: Cory Wolfley Po. Box 3612	Submit Certificate of Assumed Business Name and \$20.00 fee to:
HAILEY II) 43333 5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Signature: G. L. Wall	IDANO SECRETARY OF STATE
Printed Name: Cory J. Wolfify	95/98/2999 99:98 CK: 2000 CT: 130785 NH: 315899
Capacity: Onwer	1 0 28.80 = 28.86 ASSUM HAVE # 2

(see instruction # 8 on back of form)

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