CERTIFICATE OF ASSUMED BUSINESS NAME

To	Pursuant to Section 53-504, Idaho C	ode the undersigned gives indice of
ado	option of an Assumed Business Name.	SECRETARY OF STATE
1.	The assumed business name which the business is:	undersigned use(s) in the transaction of
	Lifestyle Management	- Consultants
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		(es) of the entity or individual(s) doing name is/are:
	<u>Name</u>	Address
	Jo Anne Bell	1 1119 Ironwood Parleway, Swite 101 Cocor of Mone, DO 82814
	David R. Hade	1119 Ironwood Parkway, Suik 101
		Coeur d'Hiene, 20 83814
3.	The general type of business transacted under the assumed business name is: SecuriceS See categories on the reverse	
4.	4. The name and address to which correspondence should be addressed:	
	Lifestyle Management Consultants	
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1119 Fronwood Parkway, Suite 101 - Coeur d'Alene		, saire 107 delle 5 Marie, 327
	Signed	Jo anne Bell
	Ву	
	Capac	ity general partner
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer#
		Secretary of State use only
	Secretary of State	8 IDAHO SECRETARY OF STATE
	700 West Jefferson	DATE 04/24/1997 0900 86021 2
	PO Box 83720 Boise ID 83720-0080	CX #: 4214 CUST# 80357
	Doise ID UST 20-0000	ASSUM NAME 10 20.00= 20.00
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