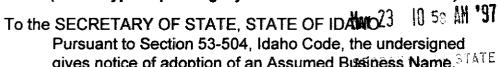
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)





	Pursuant to Section 53-504, Idaho Code gives notice of adoption of an Assumed	
1.	The assumed business name which the und business is:	
	Women's Counseling Y	- Recovery Services
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	<u>Name</u>	Complete Address
	Mary Alice Rich	3010 No. Orchard, Ste 4 Boise, Idaho 83706
3.	The general type of business transacted un (mark only those that apply)	der the assumed business name is:
,	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate Mining
4.	correspondence should be addressed.	hone number (optional): 368-0372
	1010 No. Orchard, Stef	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Boise, ID 83706	Secretary of State
5.	Name and address for this acknowledgmen	700 West Jefferson t Basement West
	COPY IS (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only
Signatu	ye: Mary alice Rich	IDAHO SECRETARY OF STATE DATE 05/23/1997 0900 95689 3
	Name: Mary Alice Rich	CK #: 1598 CUST# 81907 © ASSUM NAME 10 20.00= 20.00
Capaci	ty: Owner	RSSLM NAME 19 20.00= 20.00 # : D 4815
	(see instruction # 8 on back of form)	** D 4815