CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 4 10 PH '91 To the SECRETARY OF STATE, STATE OF IDAHO for 10 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Solution-Focused Counse 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Tarofano, MSW, 9446 Fairview BOISE 3. The general type of business transacted under the assumed business name is: (mark only those that apply) **Retail Trade** Transportation and Public Utilities Manufacturing Finance, Insurance, and Real Estate Wholesale Trade Aariculture Services Construction Mining Phone number (optional): 33/-7833 4. The name and address to which future correspondence should be addressed: m-tocused Submit Certificate of Assumed Business ounselin Name and \$20.00 fee to: Secretary of State 83706 SEAVE 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODV IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 IAZE Secretary of State use only 2.6 10/14/1997 09:00 Revision CK: 1332 CT: 88481 BK: 46389 1 8 20.00 = 20.00 ASSUM NAME Signature: DBBAR Printed Name: <u>8</u> corp\forms\abn Capacity: (see instruction # 8 on back of form)