

CERTIFICATE OF ASSUMED BUSINESS NAME

09 MAR 16 AM 8: 34

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

 The assumed business name which the unders business is: MARRIAGE CareTakers The true name(s) and business address(es) of 	of AIWP
business under the assumed business name: Name	Complete Address OP W LINDEN Ave CDA, TO 83814
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Religious Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: PasTor Douglas Rigs 609 W. LINDEN Aire	
5. Name and address for this acknowledgment copy is (if other than # 4 above): gnature: Pasta Douglas Rigs inted Name: Pasta Douglas Rigs apacity/Title: Paston	Secretary of State use only ECCEPTORY IDANO SECRETARY OF STATE A3/16/2089 A5:2

CK: 58277441387 CT: 158010 BH: 1161261 1 8 25.88 = 25.80 ASSUM NAME # 2

D129074