CERTIFICATE OF ASSUMED BUSINESS NAME

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

- 553 - 44 9: 59

STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transaction of business is:	
- Helping Hands (Pustom Claning
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Name Elizabeth Prochanka Pr	Complete Address
Tracie Husted Br	2. DDX 140886 DISE 10 83719-0886
The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Public Utilities Wholesale Trade Construction	
	Submit Certificate of
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Assumed Business Name and \$20.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
P.O. Box 190896	Boise ID 83720-0080
Boise, 10 837110-0886	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	(208) 794-4542
	Secretary of State use only
Signature: Signature Signature Standard Signature Signat	
Capacity/Title: Partner	IDAHO SECRETARY OF STATE
(see instruction # 8 on back of form)	02/04/2003 05 = 00 CK: CASH CT: 158010 BH: 660837 1 8 20.06 = 20.06 ASSUM NAME # 8

D 62145