## CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2015 JUN 30 AM 1 31

SECHETARY OF STATE STATE OF IDAM

Please type or print legibly.
Instructions are included on back of application.

<ol> <li>The assumed business name which the undersign business is:</li> </ol>	ned use(s) in the transaction of
East Idaho Family Center	r
The true name(s) and <u>business</u> address(es) of the business under the assumed business name: <u>Name</u>	
3. The general type of business transacted under the	
Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Michael D. Williams  Hu48 Cedar Butte Cir.  Rexburg IDAHO 83440	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):  NAME  NAM	
Signature: Michael Million	Secretary of State use only
Printed Name: MICHAEL D. WILLIAMS	IDAHO SECRETARY OF STATE
Capacity/Title: DIPECTOR	06/30/2015 05:00
Signature:	CK:2983884 CT:172099 BH:14820 10 25.00 = 25.00 ASSUM NAME #

abn.pmd Rev. 07/2010



Printed Name: \_ Capacity/Title: