

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

07 MAY -9 PM 3: 19

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the und business is:	<u> </u>
Solutions Focused Lending	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  PAY DAY LOAN LESCUE, INC.  CUA 390	
3. The general type of business transacted und	der the assumed business name is:
Retail Trade	
COPY IS (if other than # 4 above):	208 571-9330
	Secretary of State use only
Signature: (signature required)	IDAHO SECRETARY OF STATE  105/09/2007 05:00  CK: CASH CT: 158010 BH: 1052622  1 6 25.00 = 25.00 ASSUM NAME # 2
Printed Name: TREVOR MAYS	IDAHO SECRETARY OF STATE  95/09/2007 05:00  CK: CASH CT: 15AN1 PM: 1500
Capacity/Title: Manager	CK: CASH CT: 158810 BH: 1852622 1 @ 25.80 = 25.80 ASSUM NAME # 2