

Capacity/Title: <u>Owner</u>

(see instruction # 8 on back of form)

CERTIFICATE OF **ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name JAN 25 AM 8: 51

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

	CASTE OF IDAHO
 The assumed business name which the under the understanding the second control of the understanding the understan	dersigned use(s) in the transaction of
business is: Solutions For Be	Her Living
The true name(s) and <u>business</u> address(es) business under the assumed business name <u>Name</u>	s) of the entity or individual(s) doing
Diane La Notte Mummer	+ 1708 Malad St Boise I 1708 malad St. Boise, I D83705 837
Randy Wenn Mummert	1708 malad St. Boise, I D83705 837
3. The general type of business transacted und	nder the assumed business name is:
Retail Trade Transportation a	n and Public Utilities
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: Diane Mummer † 1708 Malad St. Boise, FD 83705	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Phone number (optional): <u> </u>
Same as above.	Secretary of State use only
Signature: Dian Prumment	88 helpings 8
Printed Name: Diane L Mummert	IDAHO SECRETARY OF STATE 1 104 10 SECRETARY OF STATE 1 27 / 2004 05 : 00 CK: 1846 CT: 188010 BH: 723917 1 25.60 = 25.60 ASSUM HAME : 2
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