

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.

2004 OCT 12 AM 10: 43

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

STATE OF IDAHO

Millard's	Accounting Service
The true name(s) and business address business under the assumed business remains the Name	s(es) of the entity or individual(s) doing name: Complete Address
Patricia L. Millard	3293 N 10th Place, Coeur d'Alene, ID 83815
3. The general type of business transacted	under the assumed business name is:
Retail Trade Transportal Wholesale Trade Construction	tion and Public Utilities on
Services Agriculture	
ManufacturingMiningFinance, Insurance, and Real Esta	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
Patricia L. Millard	Basement West PO Box 83720
3293 N 10th Place	Boise ID 83720-0080
Coeur d'Aiene, ID 83815	208 334-2301
5. Name and address for this acknowledge	ment Phone number (optional):
COPY IS (if other than # 4 above).	208-676-0457
	Secretary of State use only
	— 88g
gnature: (Applications)	Sed uses to consider the second secretary of ST.
inted Name: Particla L. Millard	Revieed O4/2003
apacity/Title: Owner	IDAHO SECRETARY OF ST
(see instruction # 8 on back of form)	