CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE STATE OF IDAHO ## 22 AM ID- 22

4	Pursuant to Section 53-504, Idaho Code, gives notice of adoption of an Assumed B	the undersigned susficient of STATE
7.	The assumed business name which the undersigned business is:	d use(s) in the transaction of
	JDAHO ENDERMOLOGIE	
The true name(s) and business address(es) of the entity or individual(s) d business under the assumed business name is/are:		ntity or individual(s) doing
	Name CYDNEY GOYEN 1126 E	Complete Address 1300. N. SHELLEY ID 83274
3.	The general type of business transacted under the a (mark only those that apply)	ssumed business name is:
	Retail Trade Manufacturing Monufacturing Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future Phone nun correspondence should be addressed:	nber (optional):
	2539 CHANNING WAY SUITE 300	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	IDAHO FALLS, ID 83404	Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Revision 1/86	Secretary of State use only 1DAHO SECRETARY OF STATE
Signature:		07/23/1998 09:00 CK: 3896 CT: 181856 BH: 138563
Printed Name: Cybney Croyen 8		
Capacity: OWNER (see instruction # 8 on back of form)		
	(300 managari # 0 on pack of form)	