227 CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned MAR - 4 PM 2 gives notice of adoption of an Assumed Business Namgecretary OF STATE 1. The assumed business name which the undersigned use(s) is the transaction of business is: EALTH LUSCIAANE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address lame Juite 260 525 oujew 83706 BOLA 3. The general type of business transacted under the assumed business name is: (mark only those that apply) **Retail Trade** Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining Phone number (optional): 208-378-4794 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE Revision 03/04 1999 09:00 Signature: CT: 112015 IN: 193754 none 28.88 ASSUM NAME # 2 Printed Name: Capacity: / (see instruction # 8 on back of form)