CERTIFICATE OF



ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 107 NOV 23 AM 9: 30 submits for filling a certificate of Assumed Business Nam

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 undersigned use(s) in the transaction of business is: Dosha Aesthetics	
The true name(s) and business address(es) of the enbusiness under the assumed business name: Name Melanie A Austin 9023 N	ntity or individual(s) doing Complete Address 1. Baldwin Gr. Hayden 10 838
. The general type of business transacted under the a	assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Bolse ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (frother than # 4 above):	Phone number (optional): 208-762-134
Melanie A Austin 9023 N. Baldwin Ct. 12 Hayden 10 83835 Signature: Melanie A Austin Capacity/Title: President	IDAHO SECRETARY OF STATE 11/23/2007 05:6 CK: 3145 CT: 219825 BH: 1888

CK: 3145 CT: 219825 BH: 1086667 1 0 25.00 = 25.00 ASSUM MANE # 2 D117059