

## **CERTIFICATE OF** ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Eagle Acupuncture and Herbs 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: **Complete Address** Name Vic lank Weaner 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade **Agriculture** Submit Certificate of **Services Assumed Business** Mining Manufacturing Name and **\$20.00** fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Secretary of State use only Signature: **Printed Name:** IDAHO SECRETARY OF STATE Capacity/Title: (see instruction # 8 on back of form)

09/26/2002 05:00 CK: 1656 CT: 163786 BH: 498372 8 28.98 = 28.98 ASSUM HAME # 2

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