

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. ** SEP -9 Ph 12: 27

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

(see instruction #8 on back of form)

STATE OF IDAHO

 The assumed business name which the under business is: 	ersigned use(s) in the transaction of
MintPower Hypnosis	
The true name(s) and <u>business</u> address(es) or business under the assumed business name: Name	of the entity or individual(s) doing : Complete <u>Address</u>
	12992 Sonora Ave Kuna, Id 83634
3. The general type of business transacted und	der the assumed business name is:
☐ Wholesale Trade ☐ Construction	and Public Utilities
Services Agriculture	Submit Certificate of Assumed Business
ManufacturingMiningFinance, Insurance, and Real Estate	Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Mind Power Hypnosis	PO Box 83720 Boise ID 83720-0080
12992 Sonora Ave	208 334-2301
<u>Kuna</u> , Id 83634	Phone number (optional):
Name and address for this acknowledgmer copy is (if other than # 4 above):	(208) 362 - 7138
Same as above	608 2063 · 1100
Dame 43 400 ve	Secretary of State use only
Signature: Deborah J. Russo	IDAHO SECRETARY OF STATE
Printed Name: <u>Deborah</u> J Russo	IDAHO SECRETARY OF STATE 99/09/2902 05:00 CK: 2697 CT: 158810 BH: 487848 CK: 2697 CT: 158810 ACSIM MOME # 2
Capacity/Title: Owner / Manager	1 8 28.88 = 20.88 ASSUM WAME # 2

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