Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

SECONON-5 AM 9: 09

	1 mig 100. \$20.0			STATEGY	^{9:} 09
1.	The assumed business name which the undersigned use(s) in the transaction of business is: Boise Therapeutic Massage				
	2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):			
	Wang Medical, Inc.	3601 N. Cole Rd. Boise, ID 83704			
	(Name)	(Address)			
	(Name)	(Address)			
	(Name)	(Address)			
	(Name)	(Address)			
3.	The general type of business transacted under the assumed business name is:				
	Retail Trade	Transportation and Public Utilities			
		Wholesale Trade Agriculture Mining Services Manufacturing Finance, Insurance, and Real Estate			
	∑ Services	Mandiacturing	i mance, i	isurance, and ite	ai Estate
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than # 4):				ledgment
	Wang Medical, Inc.				
	(Name) 3601 N. Cole Rd.		(Name)		
	(Address)		(Address)		
	Boise, ID 83704 (City) (S	State) (Zipcode)	(City)	(State)	(Zipcode)
	(50)	nate) (Elposot)	(Oily)	(Gtato)	(Zipcode)
Printed Name: Feng-Ling Wang			Secretary of State use only		
Sig	gnature: Just ing	Warry	IDAH	O SECRETARY OF ST	'ATE
		no Wang		/05/2015 05: CT:105660 BH:	
	inted Name: Fengl	1		= 25.00 ASSUM	
Sig	gnature:		! 		
Printed Name:				182461	

Rev. 08/2015