



# 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 gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

MASSAGE MIRAGE OF IDAHO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

RYAN QUICK

298 NOAH ST CHUBBUCK, ID 83202

JESSICA QUICK

298 NOAH ST CHUBBUCK, ID 83202

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade         | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services                | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

4. The name and address to which future correspondence should be addressed:

Phone number (optional): \_\_\_\_\_

RYAN QUICK

298 NOAH ST

CHUBBUCK, ID 83202

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

OWNER, OPERATOR

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

10/19/2000 09:00  
CK: 2061 CT: 137429 BH: 355570

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 39836

Revision 12/99

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FILED/EFFECTIVE  
OCT 19 AM 8:53  
STATE OF IDAHO