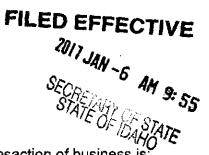


## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00



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1.	The assumed business name which the undersigned use(s) in the transaction of business is:						
	Serenity Massage	<u> </u>		<del> </del>		· · · · · · · · · · · · · · · · · · ·	
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):						
	Tara Wilcox	<u> </u>	1/2 Park Lane, Pocatello, Idaho 83201				
	(Name)	(Address)					
	(Name)	(Address)					
	(Name)	(Address)					
	(Name)	(Address)				——————————————————————————————————————	
3.	The general type of business transacted under the assumed business name is:						
	Retail Trade	Construction		Transportation	and Public U	tilities	
	Wholesale Trade	Agriculture		Mining			
	⊠ Services	Manufacturing		Finance, Insur	rance, and Re	al Estate	
4.	Mailing address for future	correspondence:		Name and address for	or this acknow	vledgment	
	Tara Wilcox		_			·	
	Name) 828 1/2 Park Lane			Non:e)			
	(Address) Pocatello, Idaho 83201		(	Address)	- · · · · -		
	(City)	(State) (Zipcode)	(	City	(State)	(Zipcode)	
Printed Name: Tara Wilcox				Secretary of	f State use only		
Si	gnature: <u>(ana U</u>	ilcox					
Printed Name:				IDAHO SECRETARY OF STATE			
Signature:				01/06/2017 05:00 CK:1041 CT:333068 BH:1562734			
Printed Name:				10 25.00 =	25.00 ASSU	M NAME #2	
	gnature:			12101	001		
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Rev. 08/2015