

1.44

 $\label{eq:state_state} \mathbf{x} = \sum_{k=1}^{n} \mathbf{x}^{k} \mathbf{y}^{k} + \mathbf{x}^{k} \mathbf{y}^{k} + \mathbf{x}^{k} \mathbf{y}^{k} + \mathbf{y}^{k} \mathbf{y}^{k} + \mathbf{y}^{k} \mathbf{y}^{k} \mathbf{y}^{k} + \mathbf{y}^{k} \mathbf{y$

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

D 85156

2005 MAR -2 AM 9: 29

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersigned use(s) in the transaction of	
business is:	t. 1_
SpaScents Bath Essen	Mais
The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed business name:	
Name	Complete Address
Nicole Waggoner 7910	W. Gillis Rd.
Boì	se 10 83714
3. The general type of business transacted under the	assumed business name is:
	•
Retail Trade Transportation and Pr	ublic Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of Assumed Business
Manufacturing Mining	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	0
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
Correspondence should be addressed.	Basement West
Spascents	PO Box 83720 Boise ID 83720-0080
7910 W. GTILS KO	208 334-2301
BOISE, ID 85+19	
5. Name and address for this acknowledgment	Phone number (optional):
COPy is (if other than # 4 above).	208-429-1460
- A - A	Secretary of State use only
Signature:	
(Algorial under required)	
Printed Name: NICOLE Waggorler	
Capacity/Title: ()\\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	IDAHO SECRETARY OF STATE 93/92/2005 95:00
(see instruction # 8 on back of form)	CK: 5328 CT: 158010 BH: 796088 1 0 25.00 = 25.00 ASSUM NAME #
	사람들은 보다