

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

97 SEP 22 AM 8:34
SECRETARY OF STATE
STATE OF IDAHO

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

Body Sense Massage Therapy

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

Address

Shari A. Poulton

PO Box 168

Oakley ID 83346

3. The general type of business transacted under the assumed business name is:

Services (Health)

See categories on the reverse.

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

Shari A. Poulton

PO Box 168 Oakley, Idaho 83446

Signed

Shari A. Poulton

By

Shari A. Poulton

Capacity

Sole proprietor

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

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE
0972271997 09.00
CK: 1003 CT: 87441 BH: 40228

1 @ 20.00 = 20.00 ASSUM NAME

08274

Revision 10/96

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