CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 MAR -2 AM 8: 55

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

Victoria's lonic Foot Spa 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address	
VICNIC U. F ALGITO	
3. The general type of business transacted under the	he assumed business name is:
Transportation and	
Retail Trade Transportation and	ร เ นมกับ บันแน้ตอ
	Submit Certificate of
	Assumed Business
	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	On another of Otata
4. The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
Victoria's Ionic Foot Spa	PO Box 83720
2950 N Corbin	Boise ID 83720-0080 208 334-2301
Post Falis ID 83854	200 334-2301
Name and address for this acknowledgment	Phone number (optional):
copy is (if other than # 4 above):	208-773-2221
	Secretary of State use only
gnature:	
mature: Wilkie G. Otano	TROUB CERPETARY OF STATE
nted Name: Vickie J. Patano	IDAHO SECRETARY OF STATE 03/02/2007 05:0 CK: 3296 CT: 158810 BH: 18367
Desity/Title: Owner	# 1 9 25.00 = 25.00 ASSUM MAKE
	Dimagin
(see instruction # 8 on back of form)	U LUT ITIN