



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.

APR 24 PM 3:19

SE. STATE
SIN 111 1110

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

MANDALA MASSAGE

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

Michael James Coles

914 Robert St. Boise, ID 83705

Sonyia Coles

914 Robert St. Boise, ID 83705

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

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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

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

Michael Coles
914 Robert St.
Boise ID 83705

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

Phone number (optional):

(208) 342-7444

Signature: Michael J. Coles
(signature required)

Printed Name: Michael J. Coles

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

0107514

IDAH0 SECRETARY OF STATE
 01/24/2007 05:00
 CK: CASH CT: 150010 BH: 1020518
 1 @ 25.00 = 25.00 ASSUM NAME # 2