

FILED/EFFECTIVE

# CERTIFICATE OF ASSUMED BUSINESS NAME

00 APR 6 AM 10:22

To the SECRETARY OF STATE, STATE OF IDAHO

SECRETARY OF STATE

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of  
adoption of an Assumed Business Name.

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

Balancing Touch Message 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
<u>Kendall M. Lutz</u>	<u>mailing P.O. Box 2597 Hailey, ID 83333</u>
	<u>physical address 3850 Flaming Wells</u>

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

Massage Therapy # 9 Services.  
See categories on the reverse

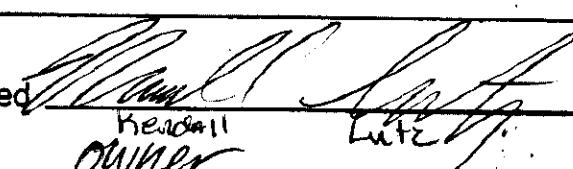
4. The name and address to which correspondence should be addressed:

Kendall M. Lutz P.O. Box 2597 Hailey, ID 83333

Signed

By

Capacity



Customer #

IDAHO SECRETARY OF STATE

Secretary of State use only  
647-067-2000 09:00  
CK: 186 CT: 129432 BH: 306400

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 34758

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

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

Revision 10/98

9 Computerization prof