

FILED/EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

00 APR -6 AM 10:22

To the SECRETARY OF STATE, STATE OF IDAHO

SECRETARY OF STATE

STATE OF IDAHO

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 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:

Kendall M. Lutz mailing P.O. Box 2527 Hailey ID 83333
physical address 3350 Flaming Wells

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 2527 Hailey ID 83333

Signed

Kendall Lutz

By

owner

Capacity

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 #

IDAHO SECRETARY OF STATE

Secretary of State uses only

04/06/2000 09:00
CX: 106 CT: 129432 BN: 306400

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 10/98

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