



# 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.

ED EFFECTIVE

2005 FEB 10 AM 8:45

SECRETARY OF STATE  
STATE OF IDAHO

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

HEALX

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

Pure, Inc.

PO Box 1085, Sandpoint ID 83864

C148968

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:

Peter Faletto

PO Box 1085

Sandpoint, ID 83864

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

Dennis McLaughlin & Associates, P.S.

601 W. Main Ave., Suite 1015

Spokane, WA 99201

Phone number (optional):

(208) 691-8888

Secretary of State use only

Signature:

*Peter Faletto*  
(signature required)

Printed Name:

Peter Faletto

Capacity/Title:

President

(see instruction # 8 on back of form)

9:00pm/10:00am forms/10:00am p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
02/10/2005 05:00  
CK: 932 CT: 150010 DH: 792377  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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