(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF	AME lersigned ss Name.
ASSUMED BUSINESS NA	AME AM 8: 2.
Pursuant to Section 53-504, Idaho Code, the und submits for filing a certificate of Assumed Busines	ng. gned use(s) in the transaction of
Please type or print legibly.	DAHOTE & B
NOTE: See instructions on reverse before fili	ng.
1. The assumed business name which the undersigned use(s) in the transaction of	
business is:	gned use(s) in the transaction of the cransaction o
A Relaxing Touch	
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
Jessica Haskell 349	Politicine Pocatello, 1D 83201
3. The general type of business transacted under	the assumed business name is:
Retail Trade Transportation and	d Public Utilities
Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:
4. The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
Jeroica Haskell	PO Box 83720 Boise ID 83720-0080
200 Heath #2	208 334-2301
Idaho Falls, 10 83401	Phone number (optional):
Name and address for this acknowledgment copy is (if other than # 4 above):	(208)621-2929
COPY 10 th only make a about.	(400) 10.010+
	Secretary of State use only
	, p65
Signature Levica & Hackell	100000 URS 10000 SECRETARY OF STATE 10000 SECRETARY OF STATE 10000 CK: 1676 CT: 158618 BH: 677813 1 9 25.88 = 25.88 ASSUM NAME #
Printed Name: JESSICO & HASKell	IDANO SECRETARY OF STATE AA/30/2003 05:00
Capacity/Title:	CK: 1076 CT: 158018 BH: 677813 1 0 25.00 = 25.00 ASSUM MANE #