

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.



Therapy As	sociates, INC
The true name(s) and business address(es) business under the assumed business nam Name Calinney INC	ne: Complete Address
Caliopey, INC	23391 Whale Bay Lane, Caldwell, ID 83607
<u> </u>	
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction	der the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Therepy Associates ANC.	Secretary of State 700 West Jefferson Basement West
Therapy Associates, INC 23391 Whale Bay Lane, Caldwell, ID 83607	PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	nt Phone number (optional): 208-455-7915
	Secretary of State use only
gnature: Elsa Gleet (signature required)	10000 SECRETARY OF STATE ### 10000
nted Name: Elsa Obert	LIDANO SECRETARY OF STATE
pacity/Title: President	IDANO SECRETARY OF STATE 95/13/2905 05: 05/13/27. TT. 154918 RM. A1
(see instruction # 8 on back of form)	- P

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