

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2014 JAN 13 AM 9:20

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Country Clinical Massage

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

Country Clinical Massage 6101 E Hwy 54 Athol, ID 83801
Emily Smedley PO Box 1015 Athol, ID 83801

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

EMILY M SMEDLEY

PO BOX 1015

ATHOL ID 83801-1015

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

Country Clinical Massage
6101 E Hwy 54
Athol, ID 83801

Signature: Emily Smedley

Printed Name: EMILY M SMEDLEY

Capacity/Title: OWNER

Signature: [Signature]

Printed Name: _____

Capacity/Title: _____

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE
01/13/2014 05:00
CK: CASH CT: 291674 BH: 1485778
1 @ 25.00 = 25.00 ASSUM NAME # 2

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