227

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.

2006 APR -3 PM 1:36

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE. See instructions on reverse before filing.

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

   InfraRed Folkvang Therapy

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
Valhalla Folkvang, LLC.	PO Box 5379 Ketchum ID 83340

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

- [ ] Retail Trade
- [ ] Wholesale Trade
- [x] Services
- [ ] Manufacturing
- [ ] Finance, Insurance, and Real Estate
- [ ] Transportation and Public Utilities
- [ ] Construction
- [ ] Agriculture
- [ ] Mining

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:

   Maya JB Burrell
   PO Box 5379
   Ketchum ID 83340

   Phone number (optional):
   208.471.0360

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

Signature: _____
(Signature required)

Printed Name: Maya JB Burrell

Capacity/Title: CFO

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
04/03/2006 05:00
CK: 307 CT: 179036 BH: 947018
1 @ 25.00 = 25.00 ASSUM NAME # 3

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