

CERTIFICATE OF

ASSUMED BUSINESS NAME 10 JUL 21 PM 4: 19

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name CRETARY OF STATE Please type or print legibly.

STATE OF IDAHO

Please type or print legibly.

illstructions are included on back of app	olication.
The assumed business name which the unbusiness is: Brazilian Massage	dersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Flavia Beck	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: FLOVICE BEOKWOOD, CT Jampa, D. 83686 5. Name and address for this acknowledgment	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
COpy is (if other than # 4 above):	Secretary of State use only
Signature: Flavia, Beck	
Capacity/Title: Ouner	
Signature:	IDANO SECRETARY OF STATE
Printed Name:	CK: CASH CT: 158010 BH: 1231604
Capacity/Title:	1 E 27:00 - F0:00 MONUL MAIN A

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