٠

227	
CERTIFICATE O	
ASSUMED BUSINES Pursuant to Section 53-504. Idaho Code, t submits for filing a certificate of Assumed	S NAME the undersigned Business Name
Please type or print legibly. Instructions are included on back of ap	STATE DE IDANO
 The assumed business name which the ur business is: 	ndersigned use(s) in the transaction of
Pure Health ar	nd Beauty Lounge
 The true name(s) and <u>business</u> address(es business under the assumed business nan <u>Name</u> 	ne:
<u>Name</u> Gina Ransom	Complete Address
	13042 w Meadowdale dr Boise, Id 83713
 3. The general type of business transacted un Retail Trade Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 13042 W Meadowdale Dr Boise, Id 83713 5. Name and address for this acknowledgment 	a and Public Utilities 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);	·
Signature Charles the has	Secretary of State use only
Signature: A Gina Ransom	
Capacity/Title: Owner	
Signature:	
Printed Name:	
Sapacity/Title:	CK: 787437 CT: 172099 BH: 1291012 1 @ 25.00 = 25.00 ASSUM NAME # 2
	D150255