

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE
STATE OF IDAHO
OCT -6 AM 10:57



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

Health and Wellness For Life

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Dawn M. Gisel</u>	<u>11651 S Schilling Loop Post Falls, Id. 83854</u>
<u>Carolynn E Gisel</u>	<u>SAB</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Health & Wellness For Life c/o Dawn M Gisel

11651 S Schilling Loop

Post Falls, Id. 83854

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

Signature: Dawn M. Gisel

Printed Name: Dawn M Gisel

Capacity: General Partner

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

IDAHO SECRETARY OF STATE
Secretary of State Use only

10/06/1997 09:00
CX: 2020 CT: 68164 BH: 44635

1 @ 20.00 = 20.00 ASSUM NAME

D 8674

Revision 2/97

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