

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

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

Teton Therapeutic Massage

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

Address

Jennifer Ware

P.O. Box 586 Driggs, ID

83422

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

massage therapy

See categories on the reverse

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

Jennifer Ware

PO Box 586, Driggs, ID 83422

Signed

Jennifer Ware

By

Jennifer Ware

Capacity

owner

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

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

Revision 1096

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03/27/2003 05:00
CK: 1070 CT: 158010 BH: 671103
1 @ 20.00 = 20.00 ASSUM NAME # 2

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