

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name AUG 26 AM 9: 55

Please type or print legibly. Instructions are included on back of application. SECRETABY OF STATE

STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is:	
Inner Balance Massage	
	dress(es) of the entity or individual(s) doing less name: Complete Address 326 East 400 North Jerome, ID 83338
Retail Trade Trans	acted under the assumed business name is: portation and Public Utilities truction
	g Submit Certificate of Assumed Business
4. The name and address to which fu correspondence should be address Sandra L. Agueda	sed: 450 North 4th Street PO Box 83720
326 East 400 North	Boise ID 83720-0080 208 334-2301
Jerome, ID 83338 5. Name and address for this acknow copy is (if other than # 4 above):	ledgment
SIPANO	Secretary of State use only
Signature: and Printed Name: Sandra L. Agu	ada
Capacity/Title: Owner	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	

D165348

Printed Name: Capacity/Title: