



# 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.

09 APR -8 PM 1:45

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

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

Traditions of Health

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

Name

Complete Address

Marie Webster  
208-339-3943

490 Linden Dr.  
Idaho Falls, ID 83401

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

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

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

Marie Webster  
490 Linden Dr.  
Idaho Falls, ID 83401

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

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

Signature: \_\_\_\_\_

(signature required)

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

(see instruction # 8 on back of form)

Secretary of State use only

5:\corp\format\form\idaho.p05  
Revised 04/2008

IDAHO SECRETARY OF STATE  
04/08/2009 05:00  
CX: 5563 CT: 150010 BH: 1164954  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D129723