



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**FILED EFFECTIVE**

2003 NOV 18 AM 8:39

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.  
NOTE: See instructions on reverse before filing.

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

Relaxation Sensation

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
<u>Crystal M Merrill</u>	<u>945 W 5 N #H50</u>
	<u>Mtn Home, ID 83647</u>

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:

Crystal M Merrill  
945 W 5 N #H50  
Mtn Home, ID 83647

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

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

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

Phone number (optional):

1-208-283-5942

Secretary of State use only

Signature: Crystal M Merrill  
(signature required)

Printed Name: Crystal M. Merrill

Capacity/Title: em Owner

(see instruction # 8 on back of form)

Form 500  
Revised 04/2003

IDaho SECRETARY OF STATE  
11/18/2003 05:00  
CX: 1004 CT: 150010 BH: 712243  
10 25.00 = 25.00 ASSUM NAME # 2

D70718