



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

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.

FILED
NOV 28 11 05 AM '99

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

Massage To Go - Calm

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>Carmen L. Campa</u>	<u>11901 W. Silver King Dr. Boise ID 83709</u>
<u>Karin K. Caicedo</u>	<u>7183 W. Elm Brook Dr. Boise, ID 83703</u>
<u>Angela Boyer</u>	<u>1704 Bedford Dr. Boise ID 83705</u>

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

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

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

Phone number (optional): _____

Karin Caicedo
7183 W. Elm Brook Dr.
Boise, ID 83703

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

Same

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

Signature: Karin K. Caicedo

Printed Name: Karin K. Caicedo

Capacity: _____

(see instruction # 8 on back of form)

Revision 1/98
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Secretary of State use only

IDAHO SECRETARY OF STATE

11/30/1999 09:00
CK: 3827 CT: 123525 BH: 269742

1 @ 20.00 = 20.00 ASSUM NAME # 2

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