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CERTIFICATE OF ASSUMED BUSINESS NAM	FILED EFFECTIVE
ASSUIVED DUSTINESS MANN Pursuant to Section 53-504, Idaho Code, the undersig submits for filing a certificate of Assumed Business No	
<u>Please type or print legibly.</u> NOTE: See instructions on reverse before filing.	SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigne business is: <u>Evergreen Healing Arts</u>	
2. The true name(s) and <u>business</u> address(es) of the obusiness under the assumed business name: Name Kayla Ann Ireland 197 N	Complete Address
3. The general type of business transacted under the Retail Trade	n //
Wholesale Trade Wholesale Trade Construction Services Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: <u>Revergencen Healing Arts</u> <u>497 N. Wrenco Rd</u> Sandpoint I.d. 83864	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment COpy is (if other than #4 above): 	Phone number (optional): (208) UU 2367
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 04/14/2006 05:0 CK: 428 CT: 199256 BH: 94926 1 @ 25.00 = 25.00 ASSUM MAME
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