

CERTIFICATE OF

FILED EFFECTIVE

ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigne business is: Soothing H	and use(s) in the transaction of $\frac{1}{2}$
2. The true name(s) and business address(es) of the elements business under the assumed business name: Name Name Hor	Complete Address P.O. BOX 35 Seshoe Bend D. \$3629
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
Natasher Herold P.D.BOX 35 Horse Shoe Bend, I.O. 83629	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):
	Secretary of State use only
Signature: A Catalan Herold Capacity/Title: Fndependent Contractor (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 10/05/2005 05:00 CK: 2503 CT: 158010 BH: 915213 1 8 25.00 = 25.00 ASSUM NAME # 2