

# CERTIFICATE OF ASSUMED BUSINESS NAME

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.

SECRETARY OF STATE  
MAR 27 PM '97

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

Healthy Connection

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	Address
<u>Ann Marie Ireland</u>	<u>608 N. 150 W. Blackfoot, ID 83221</u>
_____	_____
_____	_____

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

Services  
See categories on the reverse

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

Healthy Connection - 608 N. 150 W. Blackfoot, ID 83221

Signed Ann Marie Ireland

By \_\_\_\_\_

Capacity Sole proprietor/owner

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

DATE 03/04/1997

0900 69450 2

CK #: 1966 CUST#: 77540

ASSUM NAME 1@ 20.00= 20.00

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