

Capacity/Title:

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 09 MAR -6 PM 3: 48

FILED EFFECTIVE SECRETARY OF STATE STATE OF IDAHO

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

Real Relaxation	1 massage
2. The true name(s) and business address(es) business under the assumed business nam Name XUE Yuan Zhou	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: 1485 pole Line Rd, F, Force Twin Falls, Idaho 83301	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State use only Socretary of State use only Socretary of State use only IDAHO SECRETARY OF STATE

D128929