CERTIFICATE OF ASSUMED BUSTAGES (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.	
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
Platinum Health	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Shanell Wichlurdie	RIJ3 N. Zircon, Meridian ID 9364
Paul McMurdie	Same
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade	
The name and address to which future Phone number (optional); correspondence should be addressed:	
Shanell McMurdie	Submit Certificate of
2123 N. Zircon	Assumed Business Name and \$20.00 fee to:
Meridian, ID 83642	
	Secretary of State 700 West Jefferson
Name and address for this acknowledgmen copy is (if other than # 4 above):	Basement West PO Box 83720
same as above	Boise ID 83720-0080 208 334-2301
4 4	Secretary of State use only 1DAHO SECRETARY OF STATE
Signature: McMuhi	IDAHO SECRETARY OF STATE 98/22/2080 09:00 CK: 2695 CT: 135071 BH: 342952
Printed Name: Shanell McMurdie	1 0 20.00 = 20.00 ASSUM NAME # 2
Capacity: Own eP	Corpy Completing D 3 8 3 4 3
(see instruction # 8 on back of form)	D 38343