

CERTIFICATE OF ASSUMED BUSINESS NAME

97 OCT 14 PM 3:33

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives ~~STATE OF IDAHO~~ adoption of an Assumed Business Name.

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

DINA BELCA Herbalist And SOLESSE Representative

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>DINA BELCA</u>	<u>431 Caldwell Blvd</u>
<u>HERONDA M. BELCA</u>	<u>Nampa, Id 83651</u>

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

Health & Nutrition Services / herbs

See categories on the reverse

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

DINA BELCA 431 Caldwell Blvd
Nampa, Id 83651

Signed Dina Belca 10-3-97

By Dina Belca

Capacity 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

10/14/1997 09:00
CK: 716 CT: 88499 BH: 46773

1 @ 20.00 = 20.00 ASSUM NAME

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