

# 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.

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

One Touch of Health

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Patsy Crapo Name

1926 E 700 N St. Anthony Address  
Idaho, 83445

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

Massage Therapy (9)  
See categories on the reverse

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

Patsy Crapo - 1926 E 700 N St. Anthony  
Idaho 83445

Signed

Patsy Crapo

By

Patsy Crapo

Capacity

1

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  
10/11/2005 05:00  
CK: 3592 CT: 150010 BH: 916060  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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Revision 10/08

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