

Capacity/Title:_OWNEY

(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.

06 OCT -6 AM 9: 44

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

VIP Spa	
The true name(s) and business address(es) o business under the assumed business name: Name	
Chong Ae Bell	Complete Address 7783 Grubstake Boise, ID 83703
The general type of business transacted unde	r the assumed business name is:
Retail Trade Transportation ar	nd Public Utilities
 Wholesale Trade Construction Agriculture 	
✓ Services	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
4105 West State Street, Boise, ID 83703	PO Box 83720
	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	208-331-8277
	Secretary of State use only
ature fully (eignature required)	104/2003

IDAHO SECRETARY OF STATE
10/06/2006 05:00
CK: CASH CT: 158810 BH: 979814
1 8 25.08 = 25.08 ASSUM NAME # 2

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