



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2015 JUL 20 AM 9:00

SECRETARY OF STATE  
STATE OF IDAHO

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

Essentials Therapeutic Massage & Wellness Studio

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Della Bennett - 2501 Sherman Ave #120 CDA, ID. 83814

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

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Construction  | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Mining                              |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Della Bennett  
2501 Sherman Ave. #120  
CDA, ID. 83814

5. Name and address for this acknowledgment copy is (if other than # 4):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Printed Name: Della Bennett

Signature: Della Bennett

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

07/21/2015 05:00

CK:1602 CT:312591 BH:1484668

1@ 25.00 = 25.00 ASSUM NAME #2

D180369