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CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B	he undersigned Business Name
<u>Please type or print legibly.</u> Instructions are included on back of app	SECRETARY OF STATE
1. The assumed business name which the undersigned use(s) in the transaction of business is:Elements_Wellness_Center	
2. The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> <u>Michelle Fletcher</u>	s) of the entity or individual(s) doing ne: <u>Complete Address</u> <u>945 W Crowley</u> <u>Haho Falls, ID 8,3402</u>
 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Michelle Flatcher 945 W. Crowley Joaho falls ID 8.3402 5. Name and address for this acknowledgment copy is (if other than # 4 above): 	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: <u>Michelle Fletcher</u> Printed Name: <u>Michelle Fletcher</u> Capacity/Title: <u>Oisner</u> Signature: Printed Name: Capacity/Title:	Secretary of State use only IDANO SECRETARY OF STATE 10/02/2013 05 = 200 CK: 536337 CT: 150919 DH: 1392434 1 9 25.00 = 25.00 ASSUM WATE # 2
221/2012 abn.pmd Rev. 07/20	m D166152

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