## CERTIFICATE OF ASSUMED BUSINESSINES STATE

To the SECRETARY OF STATE, STATE OF IDAHOTARY OF STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the Alfiders ighed gives notice of

adop	ition of an Assumed Business Name.	The state of the s
	business is:	
	Northern Highli	ghts Solon & Brilley Spa
	he true name(s) and business address(es usiness under the assumed business name	
D.	Name Name	Address Portor
$\subseteq$		3475 N. gov't way 3000+
		fleyden IDaho 83835
3. The general type of business transacted under the assumed business name is:		
	Services	
	See categories on the reverse	
		·
4. T	The name and address to which correspon	ndence should be addressed:  D Truber loop dr Post Falls
4. T		
4. T - -	Sue Hansen 320	
4. T	Sue Hanson 320	Truberloop dr. Post Falls  Idehos  Essest
-	Suc Hansen 320 Signed By Capacity	D THE BETTOOP CLY POST FOILS  ZCHOO E38SK  CUSTOMER # IDANG SECRETARY OF STATE
- - S E	Suc Hansen 320  Signed  By  Capacity  Submit Certificate of Assumed  Business Name and \$20.00 fee to:	Customer# IDANG SECRETARY OF STATE  SECRETARY OF STATE  SECRETARY OF STATE  SECRETARY OF STATE  100/12001 39:00
- - S	Suc Hansen 320 Signed By Capacity	Customer # IDANG SECRETARY OF STATE