

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

11 MAY 11 AM 8: 37

Please type or print legibly. Instructions are included on back of application.

SECRE ARY OF STATE STATE OF IDAHO

The assumed business name which the undersigne business is: Hart Wellness	d use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name: Name Debbie Hart 13	entity or individual(s) doing Complete Address 95 (ambridge Idaho Falls II) 83401
3. The general type of business transacted under the Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: 1395 (ambridge talks Falls IV 83406	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
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gnature:	IDAHO SECRETARY OF STATE 05/11/2011 05:00
inted Name:	CK: 4787 CT: 225313 BH: 1273148 1 0 25.00 = 25.00 ASSUM MAME # 3
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