

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2007 JAN -3 AH 9: 02

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
Harmony Bath of Be	odu Elegance.
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
Sophia Mitchell 3	1011 Modre St. Bose, IDB37
3. The general type of business transacted under the	e assumed business name is:
Retail Trade Transportation and P Wholesale Trade Construction	Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed	Secretary of State 700 West Jefferson Basement West
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):
3011 Modre St. Boise, 10 83703	Secretary of State use only
Signature: MHChell Printed Name: Sophia Mitchell Capacity/Title: Diver	
Printed Name:	IDAHO SECRETARY OF STATE 91/03/2003 05:00 CK: 3661 CT: 150010 BH: 654524 1 0 20.00 = 20.00 ASSUM NAME # 2