

Signature:_

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2017 MAY 18 AM 8: 49

	- 1 mily 100. \$20.00.	SEURE MARY OF STATE
1.	The assumed business name which the undersign	ed use(s) in the transaction of business is:
	Awakening Inner Well	ness
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):	
		Grande Ct. Twin Falls, 10 8330
	(Name) (Address)	
3.	The general type of business transacted under the	assumed business name is:
	Retail Trade Construction	Transportation and Public Utilities
	☑ Wholesale Trade☑ Agriculture☑ Manufacturing	
	Manufacturing	r mance, msurance, and real Estate
4.	Mailing address for future correspondence:	5. Name and address for this acknowledgment
	Andrew Imper Wellness	copy is (if other than #4): Pamela Harris
	(Name)	(Name)
	Awakening Inner Wellness (Name) 352 Casa Grande Ct (Address) (Address)	352 Casa Grande Ct.
	IWIN HUIS, 10 83352	Twin Falls, 10 83301
	(City) (State) (Zipcode)	(City) (State) (Zipcode)
Printed Name: Pamela Harris		Secretary of State use only
Sig	gnature: Samela Karris	IDAKO SECRETARY OF STATE
Printed Name:		95/18/2017 05:00
Signature:		CK:4719 CT:339836 BH:1584770 16 25.00 = 25.00 ASSUM NAME #2
Pr	inted Name:	D194524

Rev. 08/2015