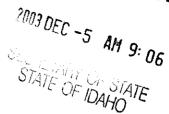




CERTIFICATE OF ASSUMED BUSINESS NAME

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.



Fusion Medispa at the Blackwell House	
The true name(s) and business address business under the assumed business name Name Peggy Parker	s(es) of the entity or individual(s) doing name: Complete Address 820 Sherman Ave. Coeur d'Alene, ID 83814
	tion and Public Utilities
 ☑ Wholesale Trade ☑ Services ☑ Manufacturing ☑ Mining ☑ Finance, Insurance, and Real Esta 	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Peggy Parker	Secretary of State 700 West Jefferson Basement West PO Box 83720
820 Sherman Ave. Coeur d'Alene, ID 83814	Boise ID 83720-0080 - 208 334-2301
5. Name and address for this acknowledgr copy is (if other than # 4 above).	ment Phone number (optional):
Scott L. Poorman, Attorney PO Box 1390	
Hayden, ID 83835	Secretary of State use only
gnature: The Pull (signature required) inted Name: Peggy Parker	- Spot upon the secretary of state 12/05/2003 05-0
spacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 12/95/2003 05:0 CK: 5863 CT: 87484 BH: 71583

