

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.

08 OCT -9 AM 9: 12
SECRETARY OF STATE

SECRETARY OF STATE STATE OF IDAHO

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Miracle Detox W	/raps
The true name(s) and business address(es) of the business under the assumed business name: Name Kirsten Hancock	e entity or individual(s) doing Complete Address 578 Cypress Way Twin Falls, ID 83301
 3. The general type of business transacted under the Retail Trade Transportation and I Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Kirsten Hancock 578 Cypress Way Twin Falls, ID 83301 	
5. Name and address for this acknowledgment copy is (if other than # 4 above): Granture:	IDAHO SECRETARY OF STATE 10/09/2008 05:06 CK: 1074 CT: 218924 BH: 113946 1 8 25.00 = 25.00 ASSUM NOME