

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 SEP 26 AM 9: 05

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

SECHERIA GESTATE STATE OF TRAHO

	JIME UT LIMTU
1. The assumed business name which the undersigned	use(s) in the transaction of
business is 511K Road Wellnes	s Center
2. The true name(s) and <u>business</u> address(es) of the e business under the assumed business name:  Name  KRISTINA M. KATINKA 100	Complete Address  OLN, 274 St.
3. The general type of business transacted under the a  Retail Trade Transportation and Pub Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:    Kristhal Kathka (Hime)   1211 W. Martin St.     Boise, In 83704	Name and \$25.00 fee to:  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
inted Name: KKISTIN2 M. Kathita apacity/Title: Owner	•
gnature:	Idaho secretary of state
rinted Name:	09/26/2012 05:00 CK: 622 CT: 274647 BH: 1341277
apacity/Title:	1 0 25.00 = 25.00 ASSUM NAME # 6

abn.pmd Rev. 07/2010

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