CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2006 ... 9:33

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

   A Tranquil Touch

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
Keri Dixon	496F Shoup Ave. West
	Twin Falls, ID 83301

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade
- ☐ Wholesale Trade
- ☒ Services
- ☐ Manufacturing
- ☐ Finance, Insurance, and Real Estate
- ☐ Transportation and Public Utilities
- ☐ Construction
- ☐ Agriculture
- ☐ Mining

Submit Certificate of Assumed Business Name and **$25.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

   Keri Dixon
   3489 E. 3838 N.
   Kimberly, ID. 83341

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional): (208) 308-1997

Signature: Keri Dixon
(signature required)

Printed Name: Keri Dixon

Capacity/Title: _____
(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
03/31/2006 05:00
CK: 1009 CT: 158010 BH: 946542
1 @ 25.00 = 25.00 ASSUM NAME # 2

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