CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.



2015 SEP 28 AM 10: 07

Ί.	The assumed business name which the undersigned use(s) in the transaction of business is:					
	Highlands Day Spa North					
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):					
	Jeane Plastino-Wood	1315 Highway 2, Suite 5A, Sandpoint, ID 83864				
	(Name)	(Address)				
	(Name)	(Address)				
	(Name)	(Address)				***************************************
	(Name)	(Address)			(a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	<u></u>
3.	The general type of business transacted under the assumed business name is:					
	Retail Trade Wholesale Trade	ConstructionAgriculture		☐ Tran	nsportation and Public U	tilities
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than # 4):					rledgment
	Highlands Day Spa-Jeane Plastino-Wood			(81		
	(Name) 4365 Inverness Dr.			(Name)		
	(Address)			(Address)		
	Post Falls, ID 83854 (City)	Slate) (Zipcode)		(City)	(State)	(Zipcode)
Printed Name: Jeane Plastino-Wood				Secretary of State use only		
Się	gnature: 1- 11 W	<u>/</u>				
Printed Name:				IDAHO SECRETARY OF STATE 09/29/2015 05:00		
Signature:				CK:1003 CT:282043 BH:1494150 16 25.00 = 25.00 ASSUM NAME #2		
Pr	inted Name:					
Signature:				D181691		

Rev. 08/2015