

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.

FILED/EFFECTIVE

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STATE OF STATE

D56767

The assumed business name which the up business is:	ndersigned use(s) in the transaction of
Golden touch Massage	Therapy
The true name(s) and <u>business</u> address(est business under the assumed business name Name	s) of the entity or individual(s) doing ne: <u>Complete Address</u>
Rebecca Kelsch	1015 Cameron
	Boise, Id 83709
3. The general type of business transacted t	under the assumed business name is:
	on and Public Utilities
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estat 	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Rehecca Kelsch	PO Box 83720
1015 Cameron	Boise ID 83720-0080 208 334-2301
Boise, Id 83709	200 334-2301
5. Name and address for this acknowledge	nent Phone number (optional):
copy is (if other than # 4 above):	208 322-57 <u>51</u>
	Secretary of State use only
Printed Name: Rebecca Kelsch	- Unano Secretary of State IDANO SECRETARY OF STATE 1000020000000000000000000000000000000

(see instruction #8 on back of form)