

**FILED/EFFECTIVE**

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO  
Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.



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

Comfy Hands Massage

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

<u>Dereck Olsen</u>	<u>711 B South 4th</u>
<u>POC. ID 83201</u>	

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

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

Comfy Hands Massage  
711 B South 4th  
POC. ID 83201

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

\_\_\_\_\_  
\_\_\_\_\_

Signature: Dereck Olsen  
Printed Name: Dereck Olsen  
Capacity: President

(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and \$20.00 fee to:  
  
Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

03/27/2001 09:00  
CK: NO CK # CT: 144167 BH: 307201

1 @ 20.00 = 20.00 ASSUM NAME # 2

D43887