



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED

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.

SECRETARY OF STATE  
STATE OF IDAHO  
MAY 28 AM 8:54

1. The assumed business name which the undersigned use(s) in the transaction of business is:  
Well Pro meaning Wellness Professional

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>Name</u>	<u>Complete Address</u>
<u>Thomas Kinsey</u>	<u>503 Hays Boise, Id. 83702</u>

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

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

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

Phone number (optional): 208-342-8938 FAX

Thomas Kinsey  
503 Hays  
Boise, Id. 83702

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

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

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

Signature: Thomas Kinsey

Printed Name: THOMAS J. KINSEY

Capacity: Owner

(see instruction # 8 on back of form)

Revision 1/98  
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Secretary of State use only  
IDAHO SECRETARY OF STATE

05/28/1998 09:00  
OK: 3081 CT: 99304 BH: 114460

1 @ 20.00 = 20.00 ASSUM NAME

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