

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. Instructions are included on back of application.

FILED EFFECTIVE

2014 JAN 13 AM 9:25

SECRETARIO STATE STATE OF EAHO

Inner Peace Healing Massage The true name(s) and business add	dress(es) of the entity or individual(s) doing
business under the assumed business Name	· · · · · · · · · · · · · · · · · · ·
Alisha Balls, LMT	16472 Franklin Blvd. Namps, ID 83687
Retail Trade Transp Wholesale Trade Const	portation and Public Utilities
Services Agrice Manufacturing Mining Finance, Insurance, and Rea	Assumed Business
 The name and address to which fur correspondence should be address Alisha Balls, LMT 	sed: 450 North 4th Street PO Box 83720
45 S Peppermint Dr.	Boise ID 83720-0080 208 334-2301
Nampa, ID 83687 Name and address for this acknow copy is (if other than # 4 above):	/ledgment
nature <u>Alisla Ball, im</u>	Secretary of State use only
nted Name: Alisha Balls, LMT	· · · · · · · · · · · · · · · · · · ·
pacity/Title: Owner	
nature: nted Name:	IDAHO SECRETARY OF STATE 91/13/2014 05:00 CK: 2234 CT: 291689 BH: 1485814 1 8 25.89 = 25.89 ASSIM MANE:

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Capacity/Title: