

## CERTIFICATE OF ASSUMED BUSINESS NAME

2017 0CT 23 AM 9: 16

FILED EFFECTIVE

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

Filing fee: \$25.00.

SECRETARY OF STATE STATE OF IDAHO

					STATE OF IC	AHO"	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:  HIGHLAND DAY SPA						
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):						
	BE POISEL LLC	2734 E REDONDO CIRCLE, POST FALLS ID 83854					
	(Name) W/88/10	(Address)					
	(Name)	(Address)	(Address)				
	(Name)	(Address)					
	(Name)	(Address)	<del>-</del>		<u></u> .		
3.	The general type of business transacted under the assumed business name is:						
☐ Retail Trade       ☐ Construction       ☐ Transportation a         ☐ Wholesale Trade       ☐ Agriculture       ☐ Mining         ☒ Services       ☐ Manufacturing       ☐ Finance, Insurar							
4.	Mailing address for future correspondence:			5. Name and address for this acknowledgment copy is (if other than # 4):			
	BE POISEL LLC (Name)						
				me)	·		
	2734 E RENDONDO CIRCLE  (Address)			dress)	<del></del>		
	POST FALLS ID 83854						
	(City) (	State) (Zipcode)	(Cit	y)	(State)	(Zipcode)	
Printed Name: EMILY R POISEL				Secretary of	State use only		
Sig	gnature: Climi f	rie	100				
Printed Name:				IDAHO SECRETARY OF STATE 10/23/2017 05:00			
Signature:				CK:856278 CT:347358 BH:1608500 10 25.00 = 25.00 ASSUM NAME #2			
Printed Name:				^ ~	6,17		
Signature:				D197847			

Rev. 08/2015