



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2016 JUL -7 AM 8:44

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

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Brandi Gallup 256 Swan Valley Hwy, Box 428 Ririe, Idaho 83443

(Name)

(Address)

Justin Gallup

Same as above

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. The general type of business transacted under the assumed business name is:

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

4. Mailing address for future correspondence:

Brandi Gallup

(Name)

PO Box 428

(Address)

Ririe, Idaho 83443

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Brandi Gallup

Signature: Brandi Gallup

Printed Name: Justin Gallup

Signature: Justin Gallup

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

07/07/2016 05:00

CX:5962 CT:326602 BH:1536491
10 25.00 = 25.00 ASSUM NAME #2

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