

FILED - ACTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

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 in the transaction of

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

Action Hypnosis Services

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

Jeffrey D. Mason

Complete Address

6102 Primrose, Boise, ID 83704

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

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☒

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

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

Phone number (optional): 208-375-4325

Action Hypnosis Services

6102 Primrose

Boise, ID 83704

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

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

12/29/2000 09:00
CK: 1831 CT: 148214 BH: 369960

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Jeffrey D. Mason

Printed Name: Jeffrey D. Mason

Capacity: Owner

(see instruction # 8 on back of form)

Revision 12/99
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