Fax 208.334.2080



## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2010 AUG 16 AM II: 09

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of	
business is: Sing Breathe Smile. Con	1
The true name(s) and <u>business</u> address(es) of the e business under the assumed business name:     Name	
3. The general type of business transacted under the a    Retail Trade	
4. The name and address to which future correspondence should be addressed:  Tom and Lisa Allen  210 Finus Dr.  Jaho Falls 10 83401	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
s lauttoni	Secretary of State use only
Signature: SOUCEUC  Printed Name: LISA ATTEN  Capacity/Title: SEUCEUC	0141417
Signature:	IDAHO SECRETARY OF STATE
Printed Name: // / / / / / / / / / / / / / / / / /	OS/16/2010 05:00 CK: 495523 CT: 172099 BH: 1234944 1 8 25.08 = 25.08 ASSUM NAME # 2