



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED

JAN 11 1999
STATE OF IDAHO
SECRETARY OF STATE

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.

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

Curves for Women, Priest River Id.

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

<u>Name</u>	<u>Complete Address</u>
<u>Just Imagine L.L.C.</u>	<u>1700 Summer Hills Ct.</u>
	<u>Post Falls, ID 83854</u>

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

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

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

Sherra L. Carlson
1700 Summer Hills Ct.
Post falls, ID 83854

Phone number (optional): 208-773-7896

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

Signature: Sherra L. Carlson

Printed Name: Sherra L. Carlson

Capacity: Manager

(see instruction # 8 on back of form)

Revision 1/98

g:\e\form\id\105

Secretary of State use only
IDaho SECRETARY OF STATE

01/11/1999 09:00
CX: 1006 CT: 109399 BH: 177486

10 20.00 = 20.00 AMOUNT NAME # 2

D21936