



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2015 JAN 26 AM 11:41

Please type or print legibly.
Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

Healthy Self

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

Grant W. Jones

Complete Address

324 N Midland Blvd #1 Nampa, ID 83651

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

Retail Trade Transportation and Public Utilities
 Wholesale Trade Construction
 Services Agriculture
 Manufacturing Mining
 Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Grant W. Jones

Healthy Self

324 N. Midland Blvd #1 Nampa 83651

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

John

Signature: John

Printed Name: Grant W. Jones

Capacity/Title: Owner

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDaho SECRETARY OF STATE

01/26/2015 05:00

CK:2521298 CT:172099 BH:1458561
1@ 25.00 = 25.00 ASSUM NAME #2

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