



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.

2007 AUG -3 AH ID: 27

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

Rejuvenation Holistic Therapies

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

Name	Complete Address
James G. Moison	2301 W. Irene St. Boise, ID. 83702
Susan R. Moison	2301 W. Irene St. Boise, ID. 83702

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

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

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Susan R. Moison
2301 W. Irene St.
Boise, ID. 83702

Phone number (optional):

208.407.7244

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

Signature:

(signature required)

Printed Name: James G. Moison; Susan R. Moison

Capacity/Title: Co-Owners

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 10/2003

IDAHO SECRETARY OF STATE
08/03/2007 05:00
CK: 1355 CT: 158810 BH: 1069002
1 @ 25.00 = 25.00 ASSUM NAME # 3

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