Pursuent to Section 53-604, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.       2007 AUG - 3 AH 10: 27         Please type or print legibly.       SECRET/ATY OF STATE STATE OF DAYO         I. The assumed business name which the undersigned use(s) in the transaction of the business is:       SECRET/ATY OF STATE STATE OF DAYO         I. The assumed business name which the undersigned use(s) in the transaction of the 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         Name       Complete Address         James G. Moison       2301 W. Irene St. Boise, ID. 83702         3. The general type of business transacted under the assumed business name is:       Submit Certificate of Assumed Business Name is:         I. The aname and address to which future correspondence should be addressed:       Submit Certificate of Assumed Business Name and 225.00 fee to:         Secretary of State       PO Exot 8720         2010 W. Irene St.       Basement West 1         205.007.7244       Secretary of State 0	CERTIFICATE OF	Surger of A Street
Submits for filing a certificate of Assumed Business Name.       2007 AUG - 3 AH IO: 27         Please type or print legibly.       SECRETARY OF STATE STATE OF DATE         NOTE: See Instructions on reverse before filing.       SECRETARY OF STATE STATE OF DATE         I. The assumed business name which the undersigned use(s) in the transaction of the business is:       Rejuvenation Holistic Theraples         2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:       Name         James G. Moison       2301 W. Irene St. Boise, ID. 83702         3. The general type of business transacted under the assumed business name is:       Submit Certificate of Agriculture Agriculture         Submit Services       Agriculture         Submit Certificate of Sarve State 700 West Jefferson Basement West PO Box 63720         Boise, ID. 83702       State 700 West Jefferson Basement West PO Box 63720 Boise ID 83720-D080 208 334-2301         5. Name and address for this acknowledgment copy is (frideer trans 4 aboxy):       Phone number (optional):         208.407.7244       Secretary of State 700 West Jefferson Basement West PO Box 63720-D080 208 334-2301         5. Name and address for this acknowledgment copy is (frideer trans 4 aboxy):       Secretary of State 700 West Jefferson Basement West PO Box 63720-D080 208 334-2301         5. Name and address for this acknowledgment (before the state for for the state for the state for the state	ASSUMED BUSINESS N	IAME FILED EFFECTIVE
NOTE: See Instructions on reverse before filling.       SECRETARY OF STATE STATE STATE OF DATE         State of Date       State of Date         I. The assumed business name which the undersigned use(s) in the transaction of business is:       Rejuvenation Holistic Therapies         I. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:       Name         I. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:       Name         I. James G. Molson       2301 W. Irene St. Bolse, ID. 83702         I. The general type of business transacted under the assumed business name is:       Image: Im		indersigned
NOTE: See Instructions on reverse before filling.       SECRETARY OF STATE STATE STATE OF DATE         State of Date       State of Date         I. The assumed business name which the undersigned use(s) in the transaction of business is:       Rejuvenation Holistic Therapies         I. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:       Name         I. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:       Name         I. James G. Molson       2301 W. Irene St. Bolse, ID. 83702         I. The general type of business transacted under the assumed business name is:       Image: Im		ness Name. 2007 AUG - 3 AH ID: 27
The uscarted business hand which the undersigned use(a) in the unitsolution of business is:     Rejuvenation Holistic Therapies      Representation Holistic Therapies      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. Molson 2301 W. Irene St. Boise, ID. 83702      Susan R. Molson 2301 W. Irene St. Boise, ID. 83702      Transportation and Public Utilities      Wholesale Trade Transportation and Public Utilities      Wholesale Trade Construction     Services Agriculture     Manufacturing Mining     Finance, Insurance, and Real Estate      The name and address to which future     correspondence should be addressed:     Susan R. Molson     Z301 W. Irene St.     Boise, ID. 83702      Source and address for this acknowledgment     copy is (r other than # 4 above):         Toward and work of temp     thed Mame: James G. Molson; Susan R. Molson     pacity/Title: Co-Owners     (ree Instruction # 3 on back of form)		
The uscarted business hand which the undersigned use(a) in the unitsolution of business is:     Rejuvenation Holistic Therapies      Representation Holistic Therapies      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. Molson 2301 W. Irene St. Boise, ID. 83702      Susan R. Molson 2301 W. Irene St. Boise, ID. 83702      Transportation and Public Utilities      Wholesale Trade Transportation and Public Utilities      Wholesale Trade Construction     Services Agriculture     Manufacturing Mining     Finance, Insurance, and Real Estate      The name and address to which future     correspondence should be addressed:     Susan R. Molson     Z301 W. Irene St.     Boise, ID. 83702      Source and address for this acknowledgment     copy is (r other than # 4 above):         Toward and work of temp     thed Mame: James G. Molson; Susan R. Molson     pacity/Title: Co-Owners     (ree Instruction # 3 on back of form)	NOTE: See instructions on reverse before n	SECRETARY OF STATE
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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:		the entity or individual(s) doing
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Susan R. Moison       2301 W. Irene St. Boise, ID. 83702         3. The general type of business transacted under the assumed business name is:	James G. Moison	
	Susan R. Moison	
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:         Susan R. Moison       Secretary of State         2301 W. Irene St.       Boise, ID. 83702         Solar, ID. 83702       Boise, ID. 83702         Solar Than and address for this acknowledgment       Phone number (optional):         copy is (if other than #4 above):       208.407.7244         Mature:       Secretary of State use only         Manufacturing       Moison         Susan R. Moison:       Secretary of State use only         Secretary of State use only       Secretary of State use only         Mature:       Secretary of State use only         Mature:       Secretary of State use only         Secretary of State use only       Secretary of State use only         Mature:       Secretary of State use only         Mature:       Secretary of State use only         Secretary of State use only       Secretary of State use only         Secretary of State use only       Secretary of State use only         Secretary of State use on	an a	
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Wholesale Trade       Construction         Services       Agriculture         Manufacturing       Mining         Finance, Insurance, and Real Estate       Submit Certificate of         Assumed Business       Name and \$25.00 fee to:         Submit Certificate of       Assumed Business         Name and address to which future       Secretary of State         correspondence should be addressed:       Secretary of State         Susan R. Moison       Basement West         2301 W. Irene St.       Boise, ID. 83702         5. Name and address for this acknowledgment       Copy is (if other than \$4 above):         Manufacturing       Worker may and workedgment         Copy is (if other than \$4 above):       208.407.7244         Secretary of State use only       Secretary of State use only         mature:       Jumes G. Moison; Susan R. Moison         teed Name:       James G. Moison; Susan R. Moison         bracity/Title:       Co-Owners         (see instruction \$8 a on back of form)       Secretary of State         0 State       Co-Owners         0 State       Secretary of State	3. The general type of business transacted under	the assumed business name is:
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A. The name and address to which future correspondence should be addressed: Susan R. Moison 2301 W. Irene St. Boise, ID. 83702 5. Name and address for this acknowledgment COPY is (if other than #4 above): mature: Marker Marker, James G. Moison; Susan R. Moison bacity/Title: (see histruction #8 on back of form) Comparison of the state of the		
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Co-Owners         IDAHO SECRETARY OF STATE           (see instruction # 8 on back of form)         08/03/2007 05:00           CK: 1355 CT: 158010 BH: 106900         1 2 25.00 = 25.00 ASSUM NAME	<ul> <li>Finance, Insurance, and Real Estate</li> <li>The name and address to which future correspondence should be addressed:         <ul> <li>Susan R. Moison</li> <li>2301 W. Irene St.</li> <li>Boise, ID. 83702</li> </ul> </li> <li>Name and address for this acknowledgment copy is (if other than #4 above):         <ul> <li>2301 W. Irene St.</li> <li>Boise, ID. 83702</li> </ul> </li> </ul>	Name and \$25.00 fee to:         Secretary of State         700 West Jefferson         Basement West         PO Box 83720         Boise ID 83720-0080         208 334-2301    Phone number (optional):          208.407.7244
(see instruction # 8 on back of form) (see instruction # 8 on back of form) CK: 1355 CT: 158610 BH: 106980 1 # 25.80 = 25.00 ASSUM NAME	Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:   Susan R. Moison   2301 W. Irene St.   Boise, ID. 83702   5. Name and address for this acknowledgment copy is (if other than #4 above):   Inature:   (if other than #4 above):	Name and \$25.00 fee to:         Secretary of State         700 West Jefferson         Basement West         PO Box 83720         Boise ID 83720-0080         208 334-2301    Phone number (optional):          208.407.7244
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