



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

REC'D DEC -7 AM 8:22
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

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

"A NEW DALON" RELAXATION Massage

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

Name

Dawn L Kimes

Complete Address

606 W River Avenue
Coeur d'Alene, ID 83814

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

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

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

Dawn Kimes
2824 S Big Rock Rd
Post Falls, ID 83854

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

Idaho Secretary of State
450 N 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):

Secretary of State use only

Signature: Dawn L Kimes
(signature required)

Printed Name: Dawn L. Kimes

Capacity/Title: owner

(see instruction # 8 on back of form)

Form 1000
Revised 04/2003

IDAHO SECRETARY OF STATE
12/07/2007 05:00
CK: 10483 CT: 158018 BH: 1088669
1 0 25.00 = 25.00 ASSUM NAME # 2

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