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| CERTIFICATE OF ASSUMED BUSINESS | NAME |
| Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Busi | indersigned 03 SEP - 8 pt |
| Please type or print legibly. NOTE: See instructions on reverse before | |
| The assumed business name which the undersigned use(s) in the transaction of business is: | |
| Eusy Rody massage | |
| The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: | |
| Name | Complete Address |
| Jackie Brown 3 | o s. Weatherby pr. Meridian, JD- 83642 |
| The general type of business transacted under | er the assumed business name is: |
| | 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 |
| Signature: Signature: Signature required: Printed Name: JOCKIE Brown Capacity/Title: (see instruction # 8 on back of form) | Secretary of State use only |