

## CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2018 JUL -2 AM 10: 43

SECRETARY OF STATE STATE OF IDAHO

		SIMIL OF ITE	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	Ponderay Acupuncture		
			-
_			
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):		
	O A A STATE (do not include the name	e you listed in #1).	
	Ponderay Acupuncture and Holistic Healing (Name) (W204492)	19 CC 105 Vermeer Dr. 77 1 Ponaela	24 300
	(4)204492)	Jano 8	202
	(Name) (Address)		-
	(Name) (Address)		
	(Name) (Address)		
3	The general type of business transacted under the	a assumed husiness name is:	
Ο.			
	☐ Retail Trade ☐ Construction ☐ Wholesale Trade ☐ Agriculture	Transportation and Public Utilities	
	Services Manufacturing	<ul><li>Mining</li><li>Finance, Insurance, and Real Estate</li></ul>	
	wandadaning		
4.	Mailing address for future correspondence:	5. Name and address for this acknowledgmen	it
	Alaka Cara	COPY IS (if other than # 4):	
	Nelson Comerci  PD Box 147  (Address)  Bonners Fery ID 83805 (City) (State) (Zipcode)	(Name)	_
	PO BOX 147	,	
	(Address)	(Address)	-
	(City) (State) (Zipcode)	(City) (State) (Zipcode	2
	(Epoddy)	(State) (Elipodue	7
Dri	inted Name: Nelson Comerci		
		Secretary of State use only	
Sig	gnature:		
Printed Name:		IDANO SECRETARY OF STATE	
		07/03/2018 05:00	
Sig	gnature:	CK:1179 CT:359986 BH:16518	
Pri	inted Name:	16 25.00 = 25.00 ASSUM NAME	、 养足
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