

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

SECRETARY OF STATE STATE OF IDAHO

STATE OF IDAHO"~				
1. The assumed business n	ame which the undersig	gned use(s) in the transaction of bu	siness is:	
Vituity				
The individual and/or ent the assumed business n	•	address(es) of those doing busines	ss under	
CEP America, LLC		t, Suite 900, Emeryville, CA 94608	W140641	
(Name)	(Address)	t, Calle 500, Effety ville, 67 (54000		
CEP America-Idaho, LL	P 2100 Powell Street	t, Suite 900, Emeryville, CA 94608	12594	
(Name)	(Address)			
(Name)	(Address)		_ _	
(Name)	(Address)			
3. The general type of busingRetail TradeWholesale TradeServices	ness transacted under the Construction Agriculture Manufacturing	ne assumed business name is: Transportation and Pu Mining Finance, Insurance, ar		
(medicine) 4. Mailing address for future		5. Name and address for this ac		
. Manning address for fatal	out opendend.	COPY is (if other than # 4):	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Kim Huerta				
(Name)	000	(Name)		
2100 Powell Street, Ste.	900	(Address)		
Emeryville, CA 94608		V 10-21-1-10,		
(City)	(State) (Zipcode)	(City) {Stai	e) (Zipcode)	
Printed Name: Theo Koury, MD		Secretary of State use only		
Signature:	3.			
		IDANO SECRETARY OF STATE		
Printed Name: David Birdsall, MD		11/14/2017 05:00 CK:102679 CT:318899 BH:1611747		
Signature: V/BL		16 25.88 = 25.00 2	ASSUM NAME #2	
Printed Name:		D1983	D198345	
Signature:				

Rev. 08/2015