



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

08 NOV -5 AM 8:09

SECRETARY OF STATE
STATE OF IDAHO

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

JUST BREATHE

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

Name	Complete Address
HIP2BEBABY LLC	217 ALEXANDER BLVD, BLACKFOOT, ID 83221
(W65444)	

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

LARINDA NICHOLS
 217 ALEXANDER BLVD
 BLACKFOOT, ID 83221

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):

Signature: *Larinda Nichols*
(signature required)

Printed Name: LARINDA NICHOLS

Capacity/Title: MANAGER

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
 11/05/2008 05:00
 CK: 97 CT: 231185 BH: 1143152
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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