

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE
MAY 10 AM 8:33

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

New Life thru Nutrition

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

Name

Address

Correna Miller 5353 E Riverway Dr

Cowd Allen Id. 83814

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

Nutrition / 7.9

See categories on the reverse

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

Correna Miller

5353 E Riverway CDA Id. 83814

Signed Correna Miller

By Owner

Capacity _____

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

IDAHO SECRETARY OF STATE

05/10/2006 09:00
CK: 14306 CITY 130001 INT 316564

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Information.cms Revision 10/96