

227



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 filling.

FILED EFFECTIVE

2010 MAY 12 AM 9:34

SECRETARY OF STATE
STATE OF IDAHO

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

Active Health and Wellness

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

Name

Active Chiropractic, PC

Complete Address

1521 E Boise Ave. Boise, ID 83706

(C172062)

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |
- Submit
 Assume
 Name &

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

Active Chiropractic, PC

1521 E Boise Ave

Boise, ID 83706

**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:

Web, DC
(signature required)

Printed Name:

Jason Watson, DC

Capacity/Title:**Owner**

(see instruction # 8 on back of form)

Secretary of State use only

Содержание

IDAHO SECRETARY OF STATE
05/12/2010 05:00
CK: 435636 CT: 172099 BH: 1221899
1 @ 25.00 = 25.00 ASSUM NAME 12

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