

9/21/2012

CERTIFICATE OF ASSUMED BUSINESS NAME

Please type or print legibly. Instructions are included on back of application.

		A. A
227		
	CERTIFICATE O	F Control of the Cont
	ASSUMED BUSINES	S NAME
Vi i	Pursuant to Section 53-504, Idaho Code, submits for filing a certificate of Assumed	S NAME , the undersigned d Business Name.
	Please type or print legibly. Instructions are included on back of ar	pplication.
1.	business is:	undersigned use(s) in the transaction of
	Baby Banana Brush	
2.	The true name(s) and <u>business</u> address(e business under the assumed business na Name Live-Right, LLC (W84698)	es) of the entity or individual(s) doing nme: Complete Address PO Box 4943, Pocatello, ID 83205
3.	The general type of business transacted use. Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of
	The name and address to which future correspondence should be addressed: Chad Winward 1584 N 750 E Shelley, ID 83274	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
	Name and address for this acknowledgment copy is (if other than # 4 above): Chad Winward 1584 N 750 E Shelley, ID 83274	
-	all	Secretary of State use only
Signatu		
Printed Name: Chad Winward Capacity/Title: Accountant		
•		
Signature:		IDAHO SECRETARY OF STATE
Printed Name:Capacity/Title:		06/03/2013 05:00 CK: 8178 CT: 268140 BH: 1376458 1 8 25.88 = 25.86 ASSUM MANE # 2

abn.pmd Rev. 07/2010

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