

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

12778 in all 9:08

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

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

The assumed business name which the under business is:	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name: Name Monster Porsonal Trauman and White Conditioning c 180305	- · · · · · · · · · · · · · · · · · · ·
3. The general type of business transacted under Retail Trade Transportation at Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: nd Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Monster Personal Training 2570 S. Substation Emmett, ID B3617	Secretary of State 450 North 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: Albandan Printed Name: Angel & Wonlass Capacity/Title: Sold Trees	Secretary of State use only
Capacity/Title: Tre oS Signature: Printed Name:	IDAHO SECRETARY OF STATE 04/10/2012 05=00 CK: 1290 CT: 233981 BH: 1319157 1 8 25.88 = 25.88 ASSUM WANE # 2

abn.pmd Rev. 07/2010

D154739