

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2013 SEP -6 AM II: 03

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which business is:	J	. ,	
Ready for Life Fitness			
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address			
Jason T. Hawkins	4264 W. Ni	4264 W. Niemann St. Meridian, ID 83646	
3. The general type of business transa	cted under the as	ssumed business name is:	
	ortation and Publ	ic Utilities	
<ul><li>Wholesale Trade ☐ Constr</li><li>Services ☐ Agricu</li></ul>			
☐ Manufacturing ☐ Mining	ł	Submit Certificate of	
Finance, Insurance, and Real		Assumed Business Name and \$25.00 fee to:	
4. The name and address to which fut		, and the second	
correspondence should be address		Secretary of State 450 North 4th Street	
4264 W. Niemann St. Meridian, ID 83646	<del>,</del>	PO Box 83720 Boise ID 83720-0080	
		208 334-2301	
	<u> </u>		
<ol><li>Name and address for this acknowle copy is (if other than # 4 above):</li></ol>	eagment		
		Secretary of State use only	
gnature:			
nted Name: Jason T. Hawkins			
pacity/Title: Owner			
gnature: 1~ T. Alic		IDAHO SECRETARY OF STATE	
nted Name:		09/06/2013 05:00 CK: 1259 CT: 287240 BH: 1388986 1 8 25.00 = 25.00 ASSUM NAME #	
pacity/Title:		1 % C3.00 = C3.00 H33NU WHEE B	

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