



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 filing.

2005 MAY 26 10:00 AM

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

BodyWorks

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

Name

Complete Address

Maria M. Funk

521 College Street Idaho Falls, Id. 83401-2622

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☒ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

Maria M. Funk

521 College Street

Idaho Falls, Id. 83401-2622

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-552-1247

Secretary of State use only

Signature: Maria M. Funk
(signature required)

Printed Name: Maria M. Funk

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
06/10/2005 05:00
CK: 207 CT: 189529 BH: 815268
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 88667

FILED EFFECTIVE