



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2014 JAN 15 AM 8:58

SECRETARY OF STATE  
STATE OF IDAHO

**Please type or print legibly.**

**Instructions are included on back of application.**

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

Involved fitness

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

Anthony Cardwell

1531 E Woodland DR Dalton Gardens id 83815

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

- |                                                              |                                                              |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" 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 |                                                              |

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

Anthony Cardwell

Involved Fitness

1531 E Woodland DR Dalton Gardens Id 83815

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

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

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature: Anthony Cardwell

Printed Name: Anthony Cardwell

Capacity/Title: owner/operated

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

IDAHO SECRETARY OF STATE  
01/15/2014 05:00  
CK: 106009007577 CT: 291746 DH: 1406010  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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