

Capacity/Title:\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

**FILED EFFECTIVE** 

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

2013 MAY -7 AM 10: 55

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

SECRETARY OF STATE STATE OF IDAHO

| The assumed business name which the und business is:  Inner SolutionS  | lersigned use(s) in the transaction of  |
|--|---|
| 2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Christopher Lee Norman   | •   |
| 3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate                                    | der the assumed business name is: and 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:  CHRIS NORMAN  1241 N LILLY AVII A OT # 104  BOISE, ID 83713  5. Name and address for this acknowledgment copy is (if other than # 4 above): | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301                                   |
| COPY IS (If other than # 4 above).   | Secretary of State use only   |
| Signature:   | 000100211, 01 0220 000111,  |
| Printed Name: CHRIS NORNO  |   |
| Capacity/Title: ปากโก  | IDAHO SECRETARY OF STATE  |
| Signature:   | 05/07/2013 05:00<br>CK: 1389901 CT: 172899 BH: 1372769  |
| Printed Name:  | 1 0 25.00 = 25.00 ASSUM MANE # 2  |

abn.pmd Rev. 07/2010

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