

CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

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

2012 NOV 13 AM 9: 38

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

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the ubusiness is:	indersigned use(s) in the transaction of
	Canyon Rim CrossFit	
2.	The true name(s) and <u>business</u> address(e business under the assumed business na Name Lopshire Enterprises Inc	es) of the entity or individual(s) doing ame: <u>Complete Address</u> 688 Poleline Rd #73 Twin Falls, ID 83301
3.	The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed: Mark Lopshire 688 Poleline Rd #73 Twin Falls, ID 83301	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	
Signa	ture: Walan	Secretary of State use only
-	ed Name: Mark Lopshire	
	city/Title: President	
•	ture:	
Printed Name:		IDAHO SECRETARY OF STATE 11/14/2012 05:00
Capacity/Title:		CK: 1027 CT: 276208 BH: 1347487 1 8 25.00 = 25.00 ASSUM NAME # 2

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