



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2015 NOV -2 AM 10:24

SECRETARY OF STATE
STATE OF IDAHO

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

HealthFox - Origen Fitness

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Hayley Calvert 1226 Burrell Ave Apt 30 Lewiston Id 83501

Name Address

Name Address

Name Address

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

- | | | |
|---|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Hayley Calvert
1226 Burrell Ave Apt 30

Lewiston ID 83501

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

Name

Address

City State Zip

Printed Name: Hayley Calvert

Signature: Hayley Calvert

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

11/02/2015 05:00

CK:1019 CT:158010 BH:1498880

1@ 25.00 = 25.00 ASSUM NAME #2

10182390