FILED EFFECTIVE

227



CERTIFICATE OF ASSUMED BUSINESS NAME

2014 MAR 17 AM 9: 42

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

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 un	indersigned use(s) in the transaction of
••	business is:	anderoigned aso(s) in the transaction of
	SAGE DAY SPA	
2.	The true name(s) and <u>business</u> address(es business under the assumed business name	
	Name	Complete Address
	UOA, LLC	1152 BOND AVE
	(W42500)	REXBURG, ID. 93440
3.	3. The general type of business transacted under the assumed business name Retail Trade Transportation and Public Utilities Wholesale Trade Agriculture	
	Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: UOA, LLC 1152 BOND AVE, REXBURG, TD, 93440	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	ent
	BIMET	Secretary of State use only
•	ture:	-
	d Name: BRENT MCFARLAND	-
	city/Title: MEMBER	
	ture:	-
Printe	ed Name:	TDAHO SECRETARY OF STATE

9/21/2012

Capacity/Title:

abn.pmd Rev, 07/2010

IDAHO SECRETARY OF STATE

03/17/2014 05:00

CK: 1741371 CT: 172099 BH: 1415678
1 @ 25.00 = 25.00 ASSUM NAME # 2

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