

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 APR -7 PM 4:23

SECRETARY OF STATE
STATE OF IDAHO

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

Concepts in Wellness

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):

Wightman Enterprise LLC 5113 Freeman Creek Rd Lenore, ID 83541

(Name) (W162699) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

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

Kenneth Wightman

(Name)

5113 Freeman Creek Rd

(Address)

Lenore

(City)

ID

(State)

83541

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Kenneth Wightman

Signature: *Kenneth Wightman*

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/10/2017 05:00

CK:13178094 CT:172099 BH:1578115

1@ 25.00 = 25.00 ASSUM NAME #2

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