



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2015 MAR 13 AM 8:42

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 undersigned use(s) in the transaction of business is:

NutriNos

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Corrine Meagher

3533 Greenfield Dr, Ammon, ID, 83406

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

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

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Corrine Meagher, 3533 Green Field Dr,
Ammon, ID, 83406

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

Signature: Corrine Meagher

Printed Name: Corrine Meagher

Capacity/Title: Owner

Signature: Corrine Meagher

Printed Name: Corrine Meagher

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE
03/13/2015 05:00

CK:1026 CT:307630 BH:1466063
1@ 25.00 = 25.00 ASSUM NAME #2

D177496