

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name 25 AP 10-36

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

	-	(STATE OF THE STATE	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:			
	Crossfit 462			
	0.000			
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
	<u>Name</u>		Complete Address	
	Fitness 462 LC	P.O. Box 552		
	W122792	11 Southf	ork Rd	
		Garden V	/alley, ID 83622	
3.	The general type of business transacted under Retail Trade Transportation an Wholesale Trade Construction 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: P.O. Box 552		Secretary of State 450 North 4th Street PO Box 83720	
	Garden Valley, ID		Boise ID 83720-0080 208 334-2301	
	83622			
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt		
Signa	ature:		Secretary of State use only	
_	ed Name: Janice Castillo			
	city/Title: owner			
Signature:			IDAHO SECRETARY OF STATE 03/26/2013 05:00	
Printed Name:			CK: 1717 CT: 200203 BH: 1366394 1 0 25.80 = 25.00 ASSUM NAME # 2	
Capacity/Title:			4	

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