

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2018 MAY -4 AM 9: 18

SECRETARY OF STATE STATE OF IDAHO

| 1. | The assumed business name which the undersigned use(s) in the transaction of business is: | | | | | | |
|-------------------------|---|---|----|--|--|----------------------|--|
| | Infinite Yoga | | | | | | |
| | | | | | | | |
| 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); | | | | | | |
| | Niki Dean | 1891 E Golden Oak Ct., Meridian ID 83646 | | | | | |
| | (Name) | (Address) | | | | | |
| | (Name) | (Address) | | 1 | | | |
| | (Name) | (Address) | | ···· | | | |
| | (Name) | (Address) | | | | | |
| | | | | | | | |
| 3. | The general type of business transacted under the assumed business name is: | | | | | | |
| | Retail Trade Wholesale Trade | <u> </u> | | | Transportation and Public UtilitiesMining | | |
| | Services | Manufacturing Finance, Insurance, and Real Estate | | | | | |
| 4. | Mailing address for future Niki Dean (Name) 1891 E Golden Oak Ct (Address) Meridian ID 83646 (City) | correspondence: (State) (Zipcode) | 5. | Name and a copy is (if other (Name) (Address) | address for this ackr er than # 4): (State) | owledgment (Zipcode) | |
| Printed Name: Niki Dean | | | | Secretary of State use only | | | |
| Signature: All B | | | | IDAHO SECRETARY OF STATE | | | |
| Printed Name: | | | | 05/04/2018 05:00 CK:1078 CT:357285 BH:1641981 16 25.00 = 25.00 ASSUM NAME #2 | | | |
| Signature: | | | | D 202420 | | | |
| Printed Name: | | | | | V WVXIIX | | |
| Sig | gnature: | | | | | | |

Rev. 08/2015