

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE 2017 NOV - 9 PM 2: 17

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

SECRETARY OF S TATE DE INAL 1. The assumed business name which the undersigned use(s) in the transaction of business is:

CROSSFIT COMPOSURE

Printed Name:

Signature:

Printed Name:

Signature:

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):

	ANIMAS ATHLETICS UL C	2039 S LONGA	10 17	AVE	BOTOE	II .	83706	
	(Name) (W 189374)	(Address)						
	(Name)	(Address)						
	(Name)	(Address)						
	(Name)	(Address)						<u> </u>
3.	The general type of business transacted under the assumed business name is:							
	<ul> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Services</li> </ul>	<ul> <li>Construction</li> <li>Agriculture</li> <li>Manufacturing</li> </ul>			Mining		n and Public U rance, and Re	
4.	Mailing address for future correspondence:			Name and address for this acknowledgment copy is (if other than # 4):				
	BOBBY MACTURELLO			(Name)				<u></u>
	(Address)			(Address)				
	<u>දිංකු වූ</u> (City) (S	tate) (Zipcode)		(City)	<u> </u>		(State)	(Zipcode)
Printed Name: Joss Asmarcano				Secretary of State use only				
Si	gnature: <u>} ^ / / / / / / / / / / / / / / / / / / </u>				IDA	HO SEC	TRETARY OF ST.	ATE

IDAHO SECRETARY OF STATE 11/09/2017 05:00 CR: 15271806 CT: 172099 BH: 1611376 16 25.00 = 25.00 ASSUM NAME #2

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