

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO  
Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.

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

BecEase Way To Fitness

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

Name	Complete Address
<u>Becky Palmer</u>	<u>8375 So. Meridian Rd</u>
	<u>Meridian, Id 83642</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

4. The name and address to which future correspondence should be addressed: Phone number (optional): \_\_\_\_\_

Becky Palmer  
8375 So. Meridian Rd  
Meridian, Id 83642

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

\_\_\_\_\_  
\_\_\_\_\_

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: \_\_\_\_\_

Becky Palmer

Printed Name: \_\_\_\_\_

Becky Palmer

Capacity: owner

(see instruction # 8 on back of form)

Secretary of State use only  
IDAHO SECRETARY OF STATE

12/20/1999 09:00  
CK: 3326 CT: 124268 BH: 274997

1 @ 20.00 = 20.00 ASSUM NAME # 2

D31581

Revision: 2/97

0 Corporation/State/pub