

CERTIFICATE OF ASSUMED BUSINESS NAME

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:

Livn-rite Health & Nutrition Ent.

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	Address
<u>JoAnne Libengood</u>	<u>2118 Varian Pl. Boise, ID 83709</u>
<u>Robert H. Libengood</u>	<u>2118 Varian Pl. Boise, ID 83709</u>

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

Retail Trade

See categories on the reverse

322-1218

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

<u>JoAnne Libengood</u>	<u>2118 Varian Pl. Boise, ID</u>
<u>Robert H. Libengood</u>	<u>2118 Varian Pl. 83709</u>

Signed

JoAnne Libengood

By

Capacity owner/operator

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

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

IDAHO SECRETARY OF STATE use only

09/29/1997 09:00
CK: 3313 CT: 87889 BHF 42477

1 @ 20.00 = 20.00 REASON NAME

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