



CERTIFICATE OF ASSUMED BUSINESS NAME

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

12 FEB 16 AM 9:02

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

"Fit For Life"

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

Name

Complete Address

Maralynn Maddox

437 South 12th Avenue
Bozelle, Idaho 83201

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

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

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Maralynn Maddox
437 South 12th Avenue
Bozelle, Idaho 83201

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

Signature:

Printed Name:

Capacity/Title:

Signature:

Printed Name:

Capacity/Title:

Secretary of State use only

IDAHO SECRETARY OF STATE
02/16/2012 05:00
CK: 1404 CT: 150810 BH: 1311019
1 @ 25.00 = 25.00 ASSUM NAME # 2

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