

Capacity/Title: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

| CERTIFICATE OF ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the unsubmits for filing a certificate of Assumed Busin Please type or print legibly. NOTE: See instructions on reverse before file | iling. |
|--|---|
| The assumed business name which the understanding business is: Lady Fitness | signed use(s) in the transaction of |
| 2. The true name(s) and business address(es) of business under the assumed business name: Name Kristine Ratliff | f the entity or individual(s) doing Complete Address 4902 Burky Dr #3 Chubbuck ID836 |
| 3. The general type of business transacted unde Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Mristine Patliff 4902 Burny Or Suite # 3 | Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment copy is (if other than #4 above): | Phone number (optional): (208) 234 - 1131 |
| Signature: Mustin Pany (signature required) Printed Name: Kristine Ratioff | Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 12/31/2003 05:00 CK: NO HUMBER CT: 158818 BH: 719221 1 25.66 = 25.60 ASSUM MARE # 2 |