



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

**FILED EFFECTIVE**

2017 JUL 10 AM 10:23

SECRETARY OF STATE  
STATE OF IDAHO

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

Life Time Concierge Services

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):

Shawn Edwards 2900 W. Government Way #40  
(Name) (Address) Coeur d'Alene, ID 83815

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐ Retail Trade  
☐ Wholesale Trade  
☒ Services

☐ Construction  
☐ Agriculture  
☐ Manufacturing

☐ Transportation and Public Utilities  
☐ Mining  
☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Shawn M. Edwards

(Name)

2900 W. Government Way #40

(Address)

Coeur d'Alene ID 83815

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Shawn M. Edwards

Signature: [Signature]

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

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

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

07/11/2017 05:00

CK:17604329395 CT:342385 BH:1592836

1@ 25.00 = 25.00 ASSUM NAME #2

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