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CERTIFICATE OF ASSUMED BUSINESS NAI Pursuant to Section 53-504, Idaho Code, the unders submits for filing a certificate of Assumed Business Please type or print legibly. Instructions are included on back of application	signed 2015 FEB 27 PM 12: 33 Name. SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is: <u>Treasure Valley Pilates</u>	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: <u>Name</u> <u>Complete Address</u> <u>RebeKah Fernandez (StoKely)</u> 919 E Boise Ave <u>Alex Fernandez</u> <u>Boise, ID 83706</u>	
<ul> <li>3. The general type of business transacted under the Retail Trade</li> <li>Retail Trade</li> <li>Transportation and P</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	
<ul> <li>4. The name and address to which future correspondence should be addressed:</li> <li><u>Rebekah Fernandez</u></li> <li><u>919 E Boise Ave</u></li> <li><u>Boise, ID 83706</u></li> <li>5. Name and address for this acknowledgment</li> </ul>	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
COPY IS (if other than # 4 above):	
Signature:	Secretary of State use only
Printed Name: <u>Rebekah Fernandez</u> Capacity/Title: <u>Owner</u> Signature:	IDAHO SECRETARY OF STATE 02/27/2015 05:00 CK:676 CT:158010 BH:1463815 16 25.00 = 25.00 ASSUM NAME #2
Printed Name: Capacity/Title:	D177123

9/21/2012