



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2014 MAY 12 AM 9:40

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:

Imagine Hydration

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

Name  
Mike Falash  
Jessica Bowman

Complete Address  
9020 W. Duck Lake Drive  
1252 N. SCRIVNER AVE  
Meridian, Idaho 83642

Garden City, ID  
83714

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

- ☒ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☐ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☐ 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:

1252 N. SCRIVNER AVENUE  
Meridian, Idaho 83642

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: [Signature]

Printed Name: Michael Falash

Capacity/Title: CO-OWNER

Signature: [Signature]

Printed Name: Jessica Bowman

Capacity/Title: CO-OWNER

Secretary of State use only

IDAHO SECRETARY OF STATE

05/12/2014 05:00

CK: 2014 CT: 296752 BH: 1424353  
1@ 25.00 = 25.00 ASSUM NAME #2

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