

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 JAN 31 -RM 12: 32

FILED EFFECTIVE

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

instructions are included on back of application.	
The assumed business name which the undersigned use(s) in the transaction of business is:	
	REV
The true name(s) and <u>business</u> add business under the assumed business. Name	dress(es) of the entity or individual(s) doing ess name: Complete Address
Angela's Gym LLC	PO Box 6244 KETCHUM, ID 83340 OR
(W58387)	360 Ninth St. E. #1 KETCHUM, ID 83340
Retail Trade Transport Wholesale Trade Constant Services Agrice Manufacturing Mining Finance, Insurance, and Read The name and address to which fur correspondence should be address REV	Submit Certificate of Assumed Business Name and \$25.00 fee to: ture Secretary of State
Ketchum, ID 83340 5. Name and address for this acknow copy is (if other than # 4 above):	ledgment
	Secretary of State use only
Signature:	
Printed Name: Argela Freeman	
Capacity/Title: Owner/Operator	
Signature: Kolok Wowe	IDANO SECRETARY OF STATE
Printed Name: Robert Freeman	91/31/2011 95:00 (X: 364) CT: 254960 BN: 1257791
Capacity/Title: Owner/Operator	1 0 25,80 = 25.00 ASSUN NAME # 3

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