

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2017 JUN -9 AM 9-09

1	SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transaction of business is:  BioElite Health						
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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):						
	Ted Kremer	16432 N. Midland Blvd #8, Nampa, ID 83687					
	(Name)	(Address)					
	(Name)	(Address)					
	(Name)	(Address)	······································				
	(Name)	(Address)		· · · . · . · . · · . · · · ·			
3.	The general type of business transacted under the assumed business name is:						
	<ul><li>☒ Retail Trade</li><li>☒ Wholesale Trade</li><li>☒ Services</li></ul>	Construction Agriculture Manufacturin	9	Minin	portation and Public Ung ng nce, Insurance, and Re		
4.	Mailing address for future correspondence:  5. Name and address for this acknowledgment copy is (if other than # 4):						
	Same (Name)			(Name)			
	(Address)			(Address)			
	(City)	(State) (Zipcode)		(City)	(State)	(Zipcode)	
	\- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			,			
Pr	inted Name: Ted Kremer				Secretary of State use only		
Si	gnature:	$\rightarrow$		:	IDAHO SECRETARY OF S	TATE	
Printed Name:				06/09/2017 05:00			
Signature:				CK:2600 CT:126007 BH:1588068 10 25.00 = 25.00 ASSUM NAME #2			
					A inc mill		
Pr	inted Name:		Ì		1195044		

Rev. 08/2015

Signature: