

CERTIFICATE OF

FILED EFFECTIVE

ASSUMED BUSINESS NAME | JUN 17 AM 9: 08 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name Please type or print legibly.

STATE OF STATE

2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address	
William	
Retail Trade Transportation Wholesale Trade Construction	nder the assumed business name is: a and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Magnetic Leaders, LLC 2561 W. Seltice Way	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
Post Falls, ID 8354	208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt
nature: Mitch Brown, Managing Me	Secretary of State use only
pacity/Title: Magnetic Healing LLP in its copacition	Ş
Maynetic Leaders LLC	
pacity/Title:	IDAHO SECRETARY OF STATE
aon prid. Nev. 97	<u> </u>

CK: 1678 CT: 246404 BH: 1278998 1 0 25.00 = 25.00 ASSUM NAME N 2

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