

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2013 JUL -3 AM 11:12

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

FIT FOR LIFE TRAINING

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

Name

Complete Address

JUSTIN WEIS

10426 W. ARDYCE CT.

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:

JUSTIN WEIS

10426 W. ARDYCE CT.

BOISE, ID 83704

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

Secretary of State use only

Signature: Justin C Weis

Printed Name: JUSTIN C WEIS

Capacity/Title: SOLE PROPRIETOR

Signature: _____

Printed Name: _____

Capacity/Title: _____

IDAHO SECRETARY OF STATE
07/03/2013 05:00
CK: CASH CT: 158010 BH: 1380773
1 @ 25.00 = 25.00 ASSUM NAME # 2

D1164312