

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 2012 DEC 12 AM 8: 49 submits for filing a certificate of Assumed Business Name.

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

SECRETARY OF STATE
STATE OF IDAHO

Hailey Crossfi			
2. The true name(s) and <u>business</u> address(e business under the assumed business name Name Next Level Fitness, LLC (W[19820)		s) of the entity or individual(s) doing me: <u>Complete Address</u> PO Box 1740, Hailey, ID 83333 Physical: 202 Winterberry Loop, Hailey, ID 83333	
Retail Wholes Service Manufa	sale Trade Construction es Agriculture	on and Pub 1	
4. The name and address to which future correspondence should be addressed: Alex Margolin PO Box 1740 Hailey, ID 83333			Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and accopy is (if other	ddress for this acknowledgmenthan # 4 above):	ent	
			Secretary of State use only
Signature: Printed Name: Alex	Margolin		
Capacity/Title: Memi			IDAHO SECRETARY OF STATE
Printed Name:		,	12/12/2012 05:00 CK: 2614 CT: 277127 BH: 1351065 1 0 25.00 = 25.00 ASSUM NAME # 6
Capacity/Title:		.	. 1

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