

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name

Nov 13 3 00 PM '97
SECRETARY OF STATE
STATE OF IDAHO

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

Box Health + Nutrition

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

<u>Name</u>	<u>Complete Address</u>
<u>Trampus M. Box</u>	<u>1000 Holly ST #17</u>
<u>Melissa J. Box</u>	<u>Nampa ID 83686</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed:

Phone number (optional): (208) 461-9578

1000 Holly ST #17

Nampa ID 83686

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

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State:
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Trampus Box

Printed Name: Trampus Box

Capacity: President

(see instruction # 8 on back of form)

Revision 2/97 g:\corp\forms\sbm.p65

Secretary of State use only
IDAHO SECRETARY OF STATE
11/13/1997 09:00
CK: CASH CT: 89791 BH: 55210
1 @ 20.00 = 20.00 ASSUM NAME

D 9711