



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.
NOTE: See instructions on reverse before filing.

**FILED EFFECTIVE
10 FEB - 3 AM 8:10**

SECRETARY OF STATE
STATE OF IDAHO

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

Positive Nutrition

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

Name
Lindsey Celis

Complete Address
2630 N. Roughstone Way
Meridian ID 83104-6

3. The general type of business transacted under the assumed business name is:

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

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

Lindsey Celis
2630 N. Roughstone Way
Meridian ID 83104-6

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise, ID 83720-0080

(208) 334-2301

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

Secretary of State use only

Signature: L. Celis

(Signature required)

Printed Name: Lindsey Celis

Capacity/Title: Owner

(see instruction #8 on back of form)

Information Form
Assumed Business Name
Revised 1/2002

IDAHO SECRETARY OF STATE
02/03/2010 05:00
CK: 705 CT: 244531 BH: 1296313
1 0 25.00 = 25.00 ASSUM NAME # 2

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