



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2013 MAR 27 AM 8:44

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

SECRETARY OF STATE  
STATE OF IDAHO

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

SAMPLE WELLNESS

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

<u>Name</u>	<u>Complete Address</u>
<u>JEFF WAKELAM</u>	<u>4375 E. THOMAS MILL DR. NAUPA ID</u> 83686
<u>LORI WAKELAM</u>	<u>" " " "</u>

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

- |                                                              |                                                              |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> 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:

JEFF & LORI WAKELAM  
4375 E. THOMAS MILL DR.  
NAUPA, ID 83686

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: [Signature]

Printed Name: JEFF WAKELAM

Capacity/Title: INDEPENDENT PRODUCT CONSULTANT

Signature: [Signature]

Printed Name: LORI WAKELAM

Capacity/Title: INDEPENDENT PRODUCT CONSULTANT

Secretary of State use only

IDAHO SECRETARY OF STATE  
03/28/2013 05:00  
CK: 1156 CT: 90591 BH: 1366749  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D162074