

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

FULFED F FIFE STIVE

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

The assumed business name which the under business is:      Molecular Alleys	ersigned use(s) in the transaction of
2. The true name(s) and business address(es) of business under the assumed business name  Name  Morgan  Alley	Complete Address 2319 G. ASNOROK dr. Gaylar Same into
Retail Trade	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 acknowledgmen copy is (if other than # 4 above):  gnature:  gnature:  inted Name:  apacity/Title:  OWNER	Secretary of State use only  Secretary of State use only  O 738729  IDAHO SECRETARY OF STATE  24/23/2010 05:00  CK: CSH CT: 158818 RH: 1219166