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CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2013 JUL 12 PM 4: 40

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the under business is:	_ ,,
Idaho Family M	agazine
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name I date Distribution Sesvices Inc. C 158283	of the entity or individual(s) doing e: <u>Complete Address</u>
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: The family Magazine 10400 Overland Rd. Boise ID 83709	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	t
	Secretary of State use only
Signature:	
Printed Name: CINAL ACLON	
Capacity/Title: Steverage Signature: Printed Name:	IDAHO SECRETARY OF STATE 07/12/2013 05:00 CK: 1737 CT: 208720 BH: 1381896 1 9 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title:abn.pmd Rev.07/20	D164456