

Signature:

Printed Name:

Capacity/Title:

(see instruction #8 on back of form)

## 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.

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1. The assumed business name which the undersigned use(s) in the transaction of business is: Bevinco of Idaho 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Liquid Instinct, LLC. 503 S JoLinda Ave. Boise, ID 83709 W 40825 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: **Basement West** 503 S. JoLinda Ave, Boise, ID 83709 PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than #4 above): (208) 283-2310 Secretary of State use only

IDAHO SECRETARY OF STATE

07/01/2005 05:00

CK: 1109 CT: 190170 BH: 819287

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