## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO ED/EFFECTIVE

_	gives notice of adoption of an Assumed Business Name, or STATE	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	FRESH FLOWERS	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	JANET C. TORLINE 1802	ELITEN LANE ISON, ID 83833
3.	3. The general type of business transacted under the assumed business name is:  (mark only those that apply)	
	☐ Wholesale Trade ☐ Agriculture ☐ Fi	ransportation and Public Utilities nance, Insurance, and Real Estate ining
4.	The name and address to which future Phone number (optional):  correspondence should be addressed:	
	JANET C. TOPLINE 1802 E LITTEN LANE	Submit Certificate of Assumed Business Name and \$20.00 fee to:
E	HARRISON, ID 83833	Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only
Signat	eure: Manet C. Iviline	
	TANET C TORING	IDAHO SECRETARY OF STATE 04/15/2002 05:00

Printed Name: U KIVI OWNER Capacity:

(see instruction # 8 on back of form)

CK: 2085 CT: 156018 BH: 459360 1 8 20.00 = 20.00 ASSUM NAME # 2