



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

FILED
May 14 9 47 AM '98
SECRETARY OF STATE
STATE OF IDAHO

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

Love Health and Nutrition

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

Name

Complete Address

Joyce Loveland

7999 Vallejo Rd.

Boise, Idaho 83709

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)



Retail Trade



Manufacturing



Transportation and Public Utilities



Wholesale Trade



Agriculture



Finance, Insurance, and Real Estate



Services



Construction



Mining

4. The name and address to which future correspondence should be addressed:

Phone number (optional): _____

Love Health and Nutrition

7999 Vallejo Rd.

Boise, Idaho 83709

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: _____

Joyce Loveland

Printed Name: _____

Joyce Loveland

Capacity: _____

independent consultant

(see instruction # 8 on back of form)

Secretary of State use only
IDMID SECRETARY OF STATE

05/14/1998 09:00
CL: 9442 CT: 96711 IN: 118365

10 20.00 = 20.00 ASSUM NAME

D 14937

Revision 1/98

signature.mdb.pas