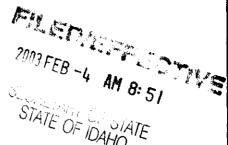


Printed Name: _

Capacity/Title:

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.	STATISTICS
NOTE: See instructions on reverse before filir	STATE OF IDAHO
The assumed business name which the undersig	" / 🗸
business is:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
M+W Markets	
THE	
The true name(s) and business address(es) of the	e entity or individual(s) doing
business under the assumed business name:	
Name	Complete Address
MIN Markets 33	10 beteler In
Doug Tate Bo	rise, Id 83706
The general type of business transacted under the	ne assumed business name is:
Retail Trade Transportation and	Public Utilities
Wholesale Trade Construction	
Services Agriculture	Cultural Contificate of
Manufacturing Mining	Submit Certificate of Assumed Business
(**)	Name and \$20.00 fee to:
Finance, Insurance, and Real Estate	
I. The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
Doug Tate	PO Box 83720
3210 bebelor La	Boise ID 83720-0080
Boise, Id 83706	208 334-2301
	Phone number (optional):
5. Name and address for this acknowledgment	Priorie number (optional).
copy is (if other than # 4 above):	
	Secretary of State use only
nature: (stensture required)	
nature: (signature required) nited Name: Oug Tate	
HEU NAME.	•

reasurer

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

02/04/2003 05:00

CK: 14863 CT: 158010 BH: 668821

1 0 20.00 = 20.00 ASSUM NAME # 2

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