



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.

The Northwest Living Water Co.	
The true name(s) and business address(es) o business under the assumed business name:	f the entity or individual(s) doing Complete Address 6895 W. Nighthawk Dr. Post Falls, ID 83854
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining	
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: The Northwest Living Water Co. 6895 W. Nighthawk Dr. Post Falls, ID 83854	Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (fother than #4 above).	Phone number (optional): 208-664-9381
	Secretary of State use only
gnature:	IDAHO SECRETARY OF STATE 99/29/2006 05:0 CK: 1036 CT: 204950 BH: 977

1 @ 25.00 = 25.00 ASSUM NAME # 2

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