

10647

# CERTIFICATE OF ASSUMED BUSINESS NAME

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.

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

The Turning Point

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                 | Address                                  |
|----------------------|--|
| <u>Kellogg, INC.</u> | <u>P.O. Box 216 New Meadows ID 83654</u> |
|                      | <u>P.O. Box 851 McCall ID 83638</u>      |

3. The general type of business transacted under the assumed business name is:

7. Retail  
See categories on the reverse

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

Turning Point  
P.O. Box 216 New Meadows ID 83654  
David H. Kellogg  
Owner

Signed Christy Lutz Harrison

By \_\_\_\_\_

Capacity Office Manager

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

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE  
DATE 01/28/1997 0900 58951

2

CK #: 3732 CUST# 75600

ASSUM NAME

1@ 20.00= 20.00

g:\corpforms\abn.pmf Revision 10/96

#: D