

Capacity/Title: General Manager

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. FILED EFFECTIVE

12FFB-8 AM 8:56

Please type or print legibly. Instructions are included on back of application.

	St Maries Co-op
2. The true name(s) and <u>busines</u> business under the assumed Name St Joe Oli Co Inc (C657//)	as address(es) of the entity or individual(s) doing business name: Complete Address 1040 Railroad Av St Maries, ID 83861
Retail Trade	transacted under the assumed business name is: Transportation and Public Utilities Construction Agriculture Mining I Real Estate Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to whi correspondence should be ad St Joe OII Co Inc PO Box 277 St Maries, ID 83861	Secretary or State
5. Name and address for this accopy is (if other than # 4 above):	knowledgment
signature: Juny	Secretary of State use only
rinted Name: Sherry Sumner	
Capacity/Title: President	IDAHO SECRETARY OF STATE
Printed Name: Kenny M Osler	62/08/2012 05:00 CK: 1389 CT: 266769 BH: 138978

abr.pmd Rev. 07/2010

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