

Signature:\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

## FILED EFFECTIVE

2018 SEP 10 PM 4: 26

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:						
	PLATINIUM WINE TOURS						
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):						
	BARRIQUE 33 WINE	TOURS LLC POB	OX 12	28 SUN VALLEY, I	3353		
	(Name) (W 93478)	(Address)		- 1000			
	(Name)	(Address)					
	(Name)	(Address)	7.504		<del></del>		
	(Name)	(Address)					
3.	The general type of business transacted under the assumed business name is:						
	☐ Retail Trade ☐ Wholesale Trade ☐ Services	☐ Construction ☐ Agriculture ☐ Manufacturing		☐ Transportation ☐ Mining ☐ Finance, Insura	and Public Ut		
4.	Mailing address for future correspondence:			lame and address for opy is (if other than # 4):	r this acknowl	edgment	
	BARRIQUE 33 WINE TOURS LLC (Name)		75.1	lame)			
	PO BOX 1228		(1)				
	(Address) SUN VALLEY ID 83353		(A	ddress)			
		ate) (Zipcode)	ত	City)	(State)	(Zipcode)	
Printed Name: CLAUDE M GUIGON				Secretary of 8	State use only		
Sig	gnature:						
Printed Name.				1DAHO SECRETARY OF STATE 09/10/2018 05:00			
Signature:				CK:CASH CT:363235 BH:1663322 16 25:00 = 25:00 ASSUM NAME #3			
Pri	inted Name:				010		
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Rev. 08/2015