Capacity: Owner

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) FILED/EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 10: 41

1. The assumed business name which the usual business is:    Premier Distributing	undersigned use(த்) பூ the transaction of
The true name(s) and business address(sbusiness under the assumed business name).	•
James Hait	Complete Address
beslie Hait	4141 & 240 N Rigby Id 83442
The general type of business transacted (mark only those that apply)	under the assumed business name is:
Retail Trade	Finance, Insurance, and Real Estaten Mining
4. The name and address to which future correspondence should be addressed:	Phone number (optional): 208 745 1553
4141 E 240 N Rigby Id 83442	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgm copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	E TANKS SPORTARY OF STATE
gnature: Lexie Kait	IDAHO SECRETARY OF STATE  65/15/2666 69:66  CK: 834593863 CT: 131885 3H: 317883

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