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

OF STATE, STATE OF IDAHO

Code, the undersigned

The assumed business name which the undersigned use(s) in the transaction of business is:	
as A Garden o	f Herbs
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
<u>Name</u>	Complete Address
Cathy Leinberger	18782 Wagner Rd. Carpwell To
Terry Leinber ger	- 11 - 11 - 18 BX
The general type of business transacted (mark only those that apply)	
Retail Trade Manufactu Wholesale Trade Agriculture Services Constructi	re
4. The name and address to which future correspondence should be addressed:	
Cathy Leinberger 18782 Wagner Rd.	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Caldwell, ID 836	Secretary of State
5. Name and address for this acknowledg copy is (if other than # 4 above):	700 West Jefferson
	Secretary of State use only 2 Those SECRETARY OF STATE
mature: Catto Leinlurger	10/16/1998 09:00 CX: 9117 CT: 185444 BH: 154832
nted Name: <u>Cathy</u> Leinberger	1 8 28.88 = 29.88 ASSUM WANTE # 12"
pacity:	7 19123
(see instruction # 8 on back of form)	corpite