

CERTIFICATE OF ASSUMED BUSINESS NAME

	FILE
CERTIFICATE OF ASSUMED BUSINESS I Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bus Please type or print legibly. NOTE: See instructions on reverse before 1. The assumed business name which the under business is: Natural Scent	iness Name. filing. filing. ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Harold D. Ternes Karen H. Ternes	
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Harold D. Ternes H	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only

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Signature: Xanol Printed Name: _// Capacity/Title: <u>/) Wn e</u>

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

102/24/2004 05:00

CK: CASH CT: 158618 BH: 728914

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