FIL	ED	EFFE	CT	'IV	Ę
-----	----	------	----	-----	---

CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the undersig submits for filing a certificate of Assumed Business Na Please type or print legibly. NOTE: See instructions on reverse before filing.	gned
<ol> <li>The assumed business name which the undersigned business is: Treasure Valley Food Co.</li> </ol>	
2. The true name(s) and business address(es) of the el business under the assumed business name: Name Sustainable Community Connections of Idaho Jac	ntity or individual(s) doing Complete Address 210 N 6th Street
C 178962	Boise ID 83702
3. The general type of business transacted under the a	
<ul> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
<ol> <li>The name and address to which future correspondence should be addressed:</li> <li>Beth Geagan</li> </ol>	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
210 N 6th Street Boise, ID 83702	(208) 334-2301
5. Name and address for this acknowledgment COPY is (if other than #4 above):	
same	Secretary of State use only
inted Name: Both CLACAN apacity/Title: Elecutive Alisector (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE <b>94/23/2010</b> 05 : 00 CK: 1265 CT: 242688 BH: 1219049 1 & 25.80 = 25.88 ASSUM MAKE :
	D 138705