

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

VM Health + Nutrition

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Danny J. Van Maanen Sr. 22 Arbor Dr. Middleton, ID 83644

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

Danny J. Van Maanen Sr.
P.O. Box 983
Middleton, ID 83644

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Danny Van Maanen Sr.

Printed Name: Danny Van Maanen Sr.

Capacity: Owner

(see instruction # 8 on back of form)

Secretary of State use only
IDAHO SECRETARY OF STATE

10/10/1997 09:00
CK: 1134 CT: 88359 BH: 46812

1 @ 20.00 = 20.00 ASSUM NAME

D9021

Revision 2/97

5/10/98/10/10/1997