

Printed Name: ()

(see instruction #8 on back of form)

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILEDALITECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

02 APR 15 AN 10: 46

SELDE WEY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Americas Choice Foods 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Whitney Browning 12079 W dr. Awood Buse JO83713 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$20.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY is (if other than #4 above): (208) 321-8124 Secretary of State use only

IDAHO SECRETARY OF STATE 04/15/2002 05:00 CK: 3938 CT: 158010 BH: 459352 28.00 ASSUN NAME # 2

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