



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2005 JUN 10 11 09 AM

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

Wild Leaf Produce

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

Linda Krantz

20498 Allendale, Wilder, ID 83676

(Home)

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☒ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

4. The name and address to which future correspondence should be addressed:

Wild Leaf Produce

~~20498 Allendale~~ PO Box 384

Wilder, ID 83676

Greenleaf

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

Phone number (optional):

Signature: Linda Krantz

(signature required)

Printed Name: Linda Krantz

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

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06/10/2005 05:00
CK: NO CK # CT: 150010 BH: 815278
1 @ 25.00 = 25.00 ASSUM NAME # 2

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