

CERTIFICATE OF ASSUMED BUSINESS NAME 10 907 10 411

10 OCT 12 AM 8: 19

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

SECRE BY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

1. The assumed business name which the undersigne business is: Twisted Chicken Jams'r	
The true name(s) and <u>business</u> address(es) of the obusiness under the assumed business name:	entity or individual(s) doing
Name -	Complete Address
<u>Mimberlee Lawson</u>	7.0.Box 115
	St. Maries, ID 83861
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pul	
☐ Wholesale Trade ☐ Construction	
Services Agriculture	
Manufacturing Mining	Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 	Secretary of State 450 North 4th Street
himberlee Dawson	PO Box 83720
0.0.Box 115	Boise ID 83720-0080
St. Maries, Td 83861	208 334-2301
5. Name and address for this acknowledgment	
COPY iS (if other than # 4 above):	
	Secretary of State use only
Signature: Knuher la Lauxon	ostrolary or only
Printed Name: <u>Winderkee</u> Dawson	
Capacity/Title: Owner	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	10/12/2010 05:00 CK: 1546 CT: 158010 BH: 1242594 1 0 25.00 = 25.00 ASSUM MAME N 2
Capacity/Title:	1 E FD:00 - FD:00 MAGNI WINE 1 -

abr.pmd Rev. 07/2010

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