Capacity/Title:\_

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

45 JAN 25 PM 1:30 SECTION OF STATE

Please type or print legibly. NOTE: See instructions on reverse before filing.

NOTE: ESS	
1. The assumed business name which the undersigned	use(s) in the transaction of
1. The assumed business name which the undersigned	, 433(0)
business is:	
Noture Pots	
_ MATURE PRIS	
the siness address(es) of the e	ntity or individual(s) doing
2. The true name(s) and <u>business</u> address(es) of the e	•
business under the assumed business have	Complete Address
<u>Name</u>	
Tricia Pinkert-Branner 1160	W Gunner st.
Kun	a. 70 83634
	assumed business name is:
3. The general type of business transacted under the	assumed business
o, the game ond Di	ublic Utilities
Retail Trade Transportation and Pu	Dio Cuino
☐ Wholesale Trade ☐ Construction	
Vyriolesalo Trade	Submit Certificate of
A Selvicos =	Assumed Business
Manufacturing Mining	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	
	Secretary of State
4. The name and address to which future	700 West Jefferson
correspondence should be addressed:	Basement West
	PO Box 83720
Nature Vots	Boise ID 83720-0080
1160 W. Gunner St.	208 334-2301
Vuna ID 93634	
- Davis	Phone number (optional):
<ol><li>Name and address for this acknowledgment</li></ol>	
copy is (if other than # 4 above):	922-5450
Copy 13 (ill offer district )	
	Secretary of State use only
	Secretary of State 455
Signature: (signature required)  Signature: Pranner  Signature Required	
de ska	IDANO SECRETARY OF STATE
Signature: (signature required)	01/25/2005 05:00
Signature: (signature required)  Printed Name: Tricia Pinkert-Branner	UR: LH UI: 190/C PH: /87CE7 1 8 18.88 = 19.89 INVOICE # 1
Printed Name: /naa //nkeri-	

D83755