CERTIFICATE OF ASSUMED BUSINESS NAME

2007 MAR -9 AM 9: 34

SECRETARY OF STATE STATE OF IDAHO

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

Please type or print legibly.

Please type or print resider	
NOTE: See Instructions on reverse before filing.	
1. The assumed business name which the undersigned use(s) in the transaction of business is: City Market & Wine	
The true name(s) and <u>business</u> address(es) of the entire business under the assumed business name: Name	Complete Address
McCall Wellies Contr PLLC 325 1 (W50305)	
3. The general type of business transacted under the assumed business name is:	
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 63720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
	Sacretary of State upo only
Signature: Mark & Charrence Mark & Charrence Mark & Charrence Mark & Charrence Mark & Capacity/Title: Other (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 03/03/2007 05:00 CK: 1076999 CT: 172099 BH: 1038993 1 0 25.00 = 25.00 ASSUM NAME 1 2