

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

GT HEALTH AND NUTRITION

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

Terence BAXTER } SAME
GAIL BAXTER } 401 VISTA DR
COEUR D'ALENE, ID
83815

3. The general type of business transacted under the assumed business name is:
 (mark only those that apply)

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

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

Terence & GAIL BAXTER
401 VISTA DR.
COEUR D'ALENE, ID
83815

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

SAME AS ABOVE

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only
IDAHO SECRETARY OF STATE

05/22/1998 09:00
CX: 2525 CT: 99130 BH: 113097

10 20.00 = 20.00 ASSUM NAME

D 15261

Terence M. Baxter
TERENCE M. BAXTER

Signature: X Gail Y. Baxter

Printed Name: X GAIL Y. BAXTER

Capacity: OWNERS

(see instruction # 8 on back of form)

Revision 2/97

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