

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

Signature:

Printed Name: _____

Signature:

2015 SEP 24 AM 11: 07

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1.	The assumed business name	e which the undersia	ined use(s) in the transaction of business 44()
	MWI Animal Health		
	WWW Allittar Health		
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):		
	MWI Veterinary Supply Co.		
	(Name)	(Address)	
	(C 107773)		
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
	, ,	(
	☐ Retail Trade ☐ Wholesale Trade ☐ Services	Construction Agriculture Manufacturing	 ☐ Transportation and Public Utilities ☐ Mining ☐ Finance, Insurance, and Real Estate
4.	Mailing address for future cor	respondence:	 Name and address for this acknowledgment copy is (if other than # 4):
	MWI Veterinary Supply Co		
	(Name)		(Name)
	3041 W. Pasadena Drive		(Addross)
	Boise ID	83705	(Address)
	(City) (State		(City) (State) (Zipcode)
Prir	nted Name: Mary Patricia Thor	mpson, SVP	Secretary of State use only
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Printed Name:			09/24/2015 05:00
			CK:741200 CT:121421 BH:1493621

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1@ 25.00 = 25.00 ASSUM NAME #2