

Printed Name: SARAH

Capacity/Title: Owna

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

10 JUN - 1 PM 12: 5

SECRETARY OF STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: **Bell Mountain** 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name **Complete Address** Sarah Berkowitz PO Box 451 Hailey, ID 83333 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Agriculture Services Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 Sarah Berkowitz/Bell Mountain Farm PO Box 451 (208) 334-2301 Hailey, ID 83333 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only Signature: Swall

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IDAHO SECRETARY OF STATE 66/02/2010 95:00 CK: 1389 CT: 248540 BH: 1224878 1 0 25.00 = 25.00 ASSUM NOME

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