## CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of

ad	loption of an Assumed Business Name.		_	***************************************	
1.	The assumed business name which the undersigned in	rse(s) in	ı the ti	raneacti	ion o

Odom Northwest Beverages

business is:

2.	The true name(s) and business address(es) of the entity or individual(s) do	ino
	business under the assumed business name is/are:	····3

Name The Odom Corporation	Address 517 Snake River Avenue Lewiston, Idaho 83501		
The general type of business transacted  Wholesale trade See categories on the reverse	under the assumed business name is:		
The name and address to which correspondence should be addressed:  The Odom Corporation, 517 Snake River Avenue, Lewiston, Idaho 83501			
Signed	John Odom		

Capacity

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

Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 Customer#

President

Secretary of State use only

IDANO SECRETARY OF STATE

07/08/1997 09:00 CK: 1838467 CT: 83936 BH: 18978

1 0 20.00 = 20.00 ASSUM NAME

D6079

describerance de la companya del companya del companya de la compa