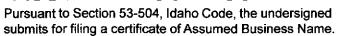
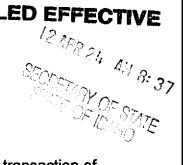


CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE



Please type or print legibly. Instructions are included on back of application.



The assumed busin business is:	ess name which the unders	igned use(s) in the transaction of
	Urban Fari	ms
business under the Nam Michael Christie	assumed business name: e 264	the entity or individual(s) doing Complete Address W.Rush Ct. Eagle, Idaho 83616
Judy Christie		W. Rush Ct.Eagle, Idaho 83616
Retail Trade Wholesale Tr Services Manufacturing	☐ Transportation and ade ☐ Construction ☐ Agriculture ☐ Mining rance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Eagle, Idaho 83616		
5. Name and address copy is (if other than #4:	for this acknowledgment	
Signature:		Secretary of State use only
Printed Name: Michael Chri	stie	
Capacity/Title: owner Signature: Judy Christie		IDAHO SECRETARY OF STATE 94/24/2012 95:00 CK: 1169 CT: 269673 BH: 1321245 1 8 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title: owner		D155121

abn.pmd Rev. 07/2010