

227



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.
Filing fee: \$25.00.

EFFECTIVE

2015 AUG 28 PM 12:57

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction is: LDS Widows and Widowers Conference

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Mink Creek Operations Inc	PO Box 1	Preston	ID	83263
(Name)	(Address)	(City)	(State)	(Zipcode)
(C180465)				
(Name)	(Address)	(City)	(State)	(Zipcode)
(Name)	(Address)	(City)	(State)	(Zipcode)
(Name)	(Address)	(City)	(State)	(Zipcode)

3. The general type of business transacted under the assumed business name is:

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Stephanie Fackrell
 (Name)
 PO Box 1
 (Address)
 Preston ID 83263
 (City) (State) (Zipcode)

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

(Name)
 (Address)
 (City) (State) (Zipcode)

Printed Name: Stephanie Fackrell, Secretary

Signature: *Stephanie Fackrell*

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE
 08/28/2015 05:00
 CK:3159754 CT:172099 BH:1490063
 1@ 25.00 = 25.00 ASSUM NAME #2

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