

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

2814 JAN 10 PM 1: 12

SECRETARY OF STATE STATE OF IDAHO

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

THE NATURAL TRUTH COALITION 2. The true name(s) and <u>business</u> address(e business under the assumed business na	
<u>Name</u>	Complete Address
Master Industries, Inc.	102 Superior Street
<u>(C157440)</u>	Sandpoint, Idaho 83864
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Steve Smith P.O. Box C Sandpoint, Idaho 83864	Submit Certificate of Assumed Business
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
gnature: Stephen F. Smith	Secretary of State use only
inted Name: Stephen F. Smith	
pacity/Title: President, Master Industries, Inc.	
nature:	
nted Name:	IDANO SECRETARY OF STATE
pacity/Title:	Ø1/10/2014 Ø5:00 CK: 2584 CT: 149888 BH: 1485453

9/21/2012

CK: 2564 CT: 149808 BH: 1485453 1 8 25.00 = 25.00 ASSUM NAME # 2

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