

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

Instructions are included on back of application.

Signature: Cara N. Shuldberg
Printed Name: Cara N. Shuldberg

Capacity/Title: Owner

FILED EFFECTIVE

2014 MAY 21 AM 8: 1.2

business is:	
Leaning Sage Farm	
 The true name(s) and <u>business</u> address(es) of business under the assumed business name: <u>Name</u> 	the entity or individual(s) doing <u>Complete Address</u>
	085 N. 1600 E
	_
<u>Cara Shuldberg</u>	Terreton, Idaho
	0.3450
☐ Retail Trade ☐ Transportation an ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Leaning Sage, Farm 1085 N. 1600 E. Terreton, Idaho 83450	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
7. 70 01 00 will	Secretary of State use only
nature: Julia & Spalley	IDAHO SECRETARY OF STATE
nted Name: Jonathan K. Shuldberg	

CK:3490 CT:297093 BH:1425616 1@ 25.00 = 25.00 ASSUM NAME #2

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