



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.

NOTE: See instructions on reverse before filing.

07 SEP 26 AM 8:41

SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Hairington Food Group

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Hairington, LLC
(W65593)

P.O. Box 5241
Boise ID 83705-5241

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

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

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Ron Jones
P.O. Box 5241
Boise ID 83705-5241

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

John Hair
c/o 6 E Alder #327
Walla Walla WA 99362

Signature: _____

(signature required)

Printed Name: _____

John Hair, Jr.

Capacity/Title: _____

member/manager

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\labn form\labn.pdf
Revised 04/2003

IDAHO SECRETARY OF STATE
09/26/2007 05:00
CK: 3305 CT: 217968 BH: 1877572
1 @ 25.00 = 25.00 ASSUM NAME # 2

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