

Printed Name: _ Capacity/Title:

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.

11 NOV 22 AM 11: 09

SECRETARY OF STATE STATE OF IDAHO

	The Garden
2. The true name(s) and <u>business</u> add business under the assumed busines Name ALF Development, LLC W82348	ress(es) of the entity or individual(s) doing ess name: <u>Complete Address</u> PO Box 140483, Garden City, ID 83714
Retail Trade Transp	Submit Certificate of Assumed Business
4. The name and address to which fut correspondence should be addresse The Garden 5811 W. Coffey St Garden City, ID 83714	decretary or otate
 Name and address for this acknowle copy is (if other than # 4 above): ALF Development, LLC PO Box 140483 Garden City, ID 83714 	edgment Secretary of State use only
rinted Name: Brett G. Labrie	
Capacity/Title: Managing Member	

abn.pmd Rev. 07/2010

IDANO SECRETARY OF STATE
11/22/2011 05:00
CK: 1107 CT: 264378 BH: 1298997
1 0 25.00 = 25.00 ASSUM NAME # 2

