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FILED EFFECTIVE

2017 SEP 27 AM 11:22
SECRETARY OF STATE
STATE OF IDAHO

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

"Buena Salud"

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):

(Name)	(Address)
Laura Medrano	417 11th Ave N, Nampa, ID 83687

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

- [x] Retail Trade
- [ ] Wholesale Trade
- [ ] Services
- [ ] Construction
- [ ] Agriculture
- [ ] Manufacturing
- [ ] Transportation and Public Utilities
- [ ] Mining
- [ ] Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

1826 W Creek Ct Nampa ID 83686
(Name)

(Address)

(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Laura Medrano

Signature: Laura Medrano

Printed Name:

Signature:

Printed Name:

Signature:

Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE
09/27/2017 05:00
CK:CASH CT:158010 BH:1604756
1@ 25.00 = 25.00 ASSUM NAME #2

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