227



## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

## FILED EFFECTIVE

2016 NOV 14 AM 11: 07

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:  Vig's Health Food  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):						
2.							
	Vig's Health, LLC	922 16th Ave, Lewis	ston, IC	2 83501			
	(Name) W145178	(Address)  (Address)					
	(Name)						
	(Name)						
	(Name)	(Address)					
3.	The general type of business transacted under the assumed business name is:						
	Retail Trade	Construction		Transportatio	n and Public U	Itilities	
	Wholesale Trade	Agriculture		Mining Mining			
		Manufacturing		Finance, Insu	ırance, and Re	al Estate	
4.	Mailing address for future correspondence:  5. Name and address for this acknowledgment copy is (fother than #4):					vledgment	
	Ron Vig	<del></del>	***				
	(Name) 922 16th Ave		BN)	sme)			
	(Address)		(Ad	ldress)			
	Lewiston, ID 83501						
	(City)	(State) (Ziposite)	रटा	ν)	(Stale)	(Zipcode)	
Printed Name: Ron Vig				Secretary of State use only			
Sig	nature:						
Pr	inted Name:		}				
Signature;			}	IDAHO SECRETARY OF STATE 11/14/2016 05:00			
Printed Name:			{	CK:4352612 CT:172033 BH:1554317 10 25.00 = 25.00 ASSUM NAME #2			
Sic	ınature:						
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