

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

GARAGE BABIES WORM COMPANY

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

Name

GARDEN VITALITY LLC

Complete Address

P.O. Box 263, Gooding, ID 83330

Elizabeth A. Young

1855 E. 1300 S., Gooding, ID 83330

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 type="checkbox"/> Services	<input checked="" 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:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Elizabeth A. Young

P.O. Box 263

Gooding, ID 83330

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

Same as above

Secretary of State use only

Signature: Elizabeth A. Young
(Signature required)

Printed Name: Elizabeth A. Young

Capacity/Title: Owner

(see instruction # 8 on back of form)

Form 100
Rev. 10/4/2003

IDaho SECRETARY OF STATE
04/25/2008 05:00
CK: 106170 CT: 172899 BH: 1111997
1 @ 25.00 = 25.00 ASSUM NAME # 2

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