



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.

FILED EFFECTIVE

08 AUG 25 AM 10: 17

SECRETARY OF STATE
STATE OF IDAHO

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

High Mountain Herbal Products

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

Herbal Health Solution Inc.

14460 Bighorn Dr., Nampa, ID 83651

(C177519)

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

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

Ole Bakke

14460 Bighorn Dr., Nampa, ID 83651

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

Legalzoom.com, Inc. c/o Karla Figueroa

7083 Hollywood Blvd. Suite 180

Los Angeles, CA 90028

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

Phone number (optional):

Signature: X

Ole Bakke
(signature required)

Printed Name: Ole Bakke

Capacity/Title: President

(see instruction # 8 on back of form)

Secretary of State use only

g:\complexe\main\form\statelab.pds
Revised 04/2003

IDAHO SECRETARY OF STATE
08/25/2008 05:00
CK: 189198 CT: 167623 BH: 1133089
1 @ 25.00 = 25.00 ASSUM NAME # 2

D124348