

227



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.

06 MAY 24 PM 2:49

SECRETARY OF STATE
STATE OF IDAHO

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

Sav-on Drugs

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
<u>New Albertson's, Inc.</u>	<u>250 Parkcenter Boulevard Boise, ID 83706</u>
<u>Cilelo 280</u>	<u></u>
<u></u>	<u></u>

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

- | | |
|--|--|
| <input checked="" 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 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:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Mandi Schiedler

New Albertson's, Inc.

250 Parkcenter Boulevard - Boise, ID 83706

Phone number (optional):

208-395-6941

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

Signature: Colleen R. Batchler
(signature required)

Printed Name: Colleen R. Batchler

Capacity/Title: Secretary
(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2000

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