

# CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

98301-6 APR 30  
SECRETARY OF STATE  
STATE OF IDAHO

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

Deserts Edge Belgians

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

Name	Address
<u>Niel M Larson</u>	<u>453 S. 1550 W.</u>
<u>M. Elaine Larson</u>	<u>Pinckney Id 83262</u>

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

Services  
See categories on the reverse

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

Niel M Larson 453 S. 1550 W  
Pinckney Id 83262

Signed M. Elaine Larson

By \_\_\_\_\_

Capacity Owner

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only  
IDAHO SECRETARY OF STATE

07/06/1998 09:00  
CX: NO CX: CT: 101057 IN: 12371

1 @ 20.00 = 20.00 ASSUM NAME

D16438