FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2011 AUG 23 PM 4: 12

SECRETARY UP STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

1.	The assumed business name which the unbusiness is:	ndersigned use(s) in the transaction of sharps shar	
2.	The true name(s) and <u>business</u> address(es business under the assumed business name Name One Flower Inc	es) of the entity or individual(s) doing me: <u>Complete Address</u>	
	C192104	18150 Calico Ave. Nampa, Id. 83687	
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business	
4.	The name and address to which future correspondence should be addressed: One Flower Inc 18150 Calico Ave Nampa, Id. 83687	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	ent	
0:		Secretary of State use only	
•	d Name: Tyson McCoy		
	city/Title: President / CEO		
	ture:		
Printe	ed Name:	IDANO SECRETARY OF STATE	
Capa	city/Title:	@8/23/2011 @5:00 CK: 765412 CT: 172099 BH: 1287	

abn.pmd Rev. 07/2010

1 0 25.00 = 25.00 ASSUM NAME # 3

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