CERTIFICATE OF ASSUMED (Please type or print I	BUSINESS NAME (Legibly)
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the understand of the gives notice of adoption of an Assumed Business Name: 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	
 The assumed business name which the business is: 	**************************************
The Whole Enchilada	
The true name(s) and business address business under the assumed business	· · · · · · · · · · · · · · · · · · ·
∪ 3189 Name BoMac Foods, L.L.C.	Complete Address
bomac roods, b.L.c.	8044 N. 5th West, Idaho Falls, ID 83401
The general type of business transact	ed under the assumed business name is:
(mark only those that apply)	
Retail Trade	cturing 🔲 Transportation and Public Utilities 🦠
Wholesale Trade Agricultu	ure Finance, Insurance, and Real Estate
☐ Services ☐ Construc	ction Mining
4. The name and address to which future	•
correspondence should be addressed	
Bradford C. Bowen	Assumed Business
8044 N. 5th West	Name and \$20.00 fee to:
Idaho Falls, ID 83401	Secretary of State
	700 West Jefferson
5. Name and address for this acknowled	Igment Basement West 1 1 PO Box 83720
COPY is (if other than # 4 above).	Boise ID 83720-0080
Marvin M. Smith, Esq.	208 334-2301
P. O. Box 51630	Secretary of State use only
Idaho Falls, ID 83405	
Signature:	The state of ctate
Printed Name: Bradford C. Bowen	IDANO SECRETARY OF STATE
Capacity: Manager	
(see instruction # 8 on back of form)	1 @ 28.88 = 28.98 ASSUM NAME
	DISK