

## CERTIFICATE OF ASSUMED BUSINESS NAME

11 DEC -1 AM 9:09

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

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

<ol> <li>The assumed business name which the und business is:</li> </ol>	lersigned use(s) in the transaction of
MORGAN ORCHARD	5
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Trent & Laura Movagu	
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Teat Moraga Orchard 5  2014 Ripu Ave.  Lowistan TD 8350	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):  59we & #4	t .
Signature: Imt Maron.  Printed Name: Trent Movann	Secretary of State use only
Capacity/Title:	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	12/01/2011 05:00 CK: 1032 CT: 158018 BH: 1299911
Capacity/Title:	1 8 25.00 = 25.00 ASSUM NAME # 2

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