

(see instruction # 8 on back of form)

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.

The assumed business name which the und business is:	dersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Unistopher Director	of the entity or individual(s) doing e: <u>Complete Address</u>
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Whole Food Food Food Popular Id 13333	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
Bark of Amouca Po Brox 299 Ketahur ld 83340 Signature: Lafter Signature required) Printed Name: Christopher De to-thier	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 94/25/2006 05:00 CK: 3760283601 CT: 81933 BH: 951865 1 9 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title:(see instruction # 8 on back of form)	1 0 25.00 = 25.00 ASSUM NAME # 2

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