

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 APR 25 AM 9: 43

FILED EFFECTIVE

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

	Off the Off the state
 The assumed business name which the un business is: 	ndersigned use(s) in the transaction of
Mountain Via	out Oronia
- Tourrain Vie	Pu Organics
The true name(s) and business address(es business under the assumed business name	s) of the entity or individual(s) doing
Name	
Patricia Forsythe	2200 N. River Road
	Payette Idaho 83661
3. The general type of business transacted un	ider the assumed husiness name in
☐ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ &Construction	and Public Utilities
Services Agriculture	
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
1147 E. Willowbrook Dr.	PO Box 83720
Meridian ID 83646	Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgmer copy is (if other than # 4 above):	nt Phone number (optional):
Samo	208 484 3538
	Secretary of State use only
Signature: Patricia (Aprittho)	abn, p85
(Signature required)	AZDOS
Printed Name: <u>Vatricia</u> Forsythe	SOCOTO DESIGNATE IDAHO SECRETARY OF STATE 84/25/2007 05:00
Capacity/Title:(see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 84/25/2007 05:00
ISSS DAUGICION & A DR DSCK AT TAAMS	

CK: 1816 CT: 158618 BH: 1649362 1 8 25.88 = 25.80 ASSUM NAME # 2

