CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

00° MG

	usiness is: SEMINIS PANE RELIEVE	ndersigne ERS PA	• •	
	he true name(s) and business address(e usiness under the assumed business name	me is/are	9 :	
9	WALTER DAVIS	103 1	Complete Address 6/6/1/19/E.S. NAM PA 8	3
. Т	he general type of business transacted u (mark only those that apply)	inder the	assumed business name is:	
	Retail Trade		Transportation and Public Utilities Finance, Insurance, and Real Estat Mining	е
Ç	orrespondence should be addressed:	Phone nu	umber (optional):	
<u> </u>	103 16 ^{HE} AVE, S. NAMPA, ID. 83651-4345	_	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
	dame and address for this acknowledgme opy is (if other than # 4 above):	ent	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
-		Revision 1798	Secretary of State use only IDAHU SECRETARY OF STATE	
_		E	U4/U8/1998 09:U0	1

Sig

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Capacity: ONNER

(see instruction # 8 on back of form)

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