

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2003 APR -2 AM 9: 02

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

STATE OF IDAHO

|   | STATE OF IDAHO   |
|---|--|
| The assumed business name which the up<br>business is:  | Indoreign and the control in the industrial  |
| business is:  | ridersigned use(s) in the transaction of   |
| - My Mysti  | C (  |
| 73.   | c garden   |
| The true name(s) and business address(established business under the assumed business name)   | S) of the entity or in this is   |
| business under the assumed business nan   | ne:  |
| Name  |  |
| Latalyst LC   | Complete Address 370 N Linder  |
| -1018091  | The state of the s |
|   | meridian ID 83642  |
| 3. The general type of burning  |  |
| The general type of business transacted un  | ider the assumed husiness name :   |
|   |  |
| NAME !  | and Public Utilities   |
| M continue of the continue of |  |
| / Manual  | Submit Contition   |
| ☐ Manufacturing ☐ Mining  | Submit Certificate of Assumed Business   |
| Finance, Insurance, and Real Estate   | Name and \$20.00 fee to:   |
| 4. The name and address to which trave-   |  |
| correspondence should be addressed:   | Secretary of State   |
|   | 700 West Jefferson<br>Basement West  |
| My mystic Garden  | PO Box 83720   |
| Go Lisa Kuge 1  | Boise ID 83720-0080  |
| Mendie Dan port 370 N   | 208 334-2301   |
| 5. Name and address for this acknowledgment   | 208 334-2301<br>Linder Rd.   |
| Copy is (if other than # 4 above):  | t Phone number (optional):   |
|   |  |
|   |  |
|   | Secretary of State use only  |
|   |  |
| Signature: See  |  |
| (Edgature required)   | Soo S  |
| rinted Name: LISA KUGEL   | IDAHO SECRETARY OF STATE   |
| apacity/Title: nember Catalyst uc   | Revis  |
| (see instruction # 8 on back of form)   | IDAHO SECRETARY OF STATE   |
| on back of form)  | CX: 2613 CT: 158010 BH: 672771   |
|   | 1 8 20.00 = 20.00 ASSUM NAME #   |