

CERTIFICATE OF ASSUMED BUSINESS NAME

O7 APR 18 PM 12: 39

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.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the und	ersigned use(s) in the transaction of
business is:	
Greenleaf C	instom Meats
2. The true name(s) and business address(es) business under the assumed business name Name Name Nouble H Entropyees LLC W48070	of the entity or individual(s) doing e: Complete Address 668 & Shadow Gx Pl Light Idea (66)
The general type of business transacted un	der the assumed business name is:
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: Wike Heath Get to Bladew Pl East \$31/L 5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	Goldwill At Grand and and
Signature: Multiple (signa) for required (signa) for required (signa) for required (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10
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