CERTIFICATE OF

FILED EFFECTIVE

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 undersigned business is: Local Yolks	d use(s) in the transaction of
2. The true name(s) and business address(es) of the elements business under the assumed business name: Name Susan 5 Medlin 3100 (Bouse)	Complete Address
3. The general type of business transacted under the a	assumed business name is:
Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	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 Phone number (optional):
nature: Susan S. Medlin pacity/Title: Where	Secretary of State use only IDANO SECRETARY OF STATE
ipacity/Title: ÜWhe v (see instruction # 8 on back of form)	CK: 2244 CT: 158010 BH: 8232 1 0 25.00 = 25.00 ASSUM MARKE