CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2009 JUL -8 AM 10: 27

SECRETARY OF STATE OF IDAHO

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.

· ••	Wildwoo	d Botanical	s	
	e(s) and business address(e: er the assumed business nar Name	•	ntity or individual(s) doing Complete Address	
\$	Name Barbara Lee, LLC		412 S Forest Glen Blvd	
	85249		Post Falls, ID 83854	
. The general ty	pe of business transacted u	nder the a	ssumed business name is:	· ·
Retail T	rade Transportation		olic Utilities	· .
☑ Service: ☐ Manufac ☐ Finance			Submit Certificate of Assumed Business Name and \$25.00 fee to:	
I. The name and address to which future correspondence should be addressed: 412 S Forest Glen Blvd			Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
Post Falls, ID 83854			(208) 334-2301	
5. Name and accopy is (# other	Idress for this acknowledgme	ent 		
			Secretary of State use only	
nature: Balla	the Sel	greetydenradabn fernafabriped Ravlaedduggeg		
ted Name:	Barbara Lee	formstabn form Revised 64/2003	· · · · · · · · · · · · · · · · · · ·	
pacity/Title:President		Page 2	0 13199	13
· —	ion # 8 on back of form)	5	TABLE REPORTED	

IDAHO SECRETARY OF STATE 27/88/2989 85:98 CK: 27861 CT: 172699 BH: 1178813 1 8 25.68 = 25.88 ASSUM NAME # 5