

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

08 OCT 21 AM II: 37

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

Adventur	e Unlimited
2. The true name(s) and business address(es business under the assumed business name Name Bio Choice, LLC (W 56281)	of the entity or individual(s) doing e: Complete Address 20254 Midland blvd. Caldwell, ID 83605
3. The general type of business transacted un	der the assumed business name is:
 Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Adventure Unlimited	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
20254 Midland blvd.	(208) 334-2301
Caldwell, ID 83605	
5. Name and address for this acknowledgmer copy is (if other than #4 above):	it .
	Secretary of State use only
gnature: <u>lum bautn</u>	IDAHO SECRETARY OF STA 10/21/2008 05 CK: 1227 CT: 238761 BK: 1 0 25.00 = 25.00 BK:
nted Name: Jason Barton	IDAHO SECRETARY OF STA
apacity/Title: Managing Member	IDAHO SECRETARY OF STA 10/21/2008 05 CK: 1227 CT: 239761 PM: 5
(see instruction # 8 on back of form)	1 0 25.00 = 25.00 ASSUM