Capacity: General Partner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly See instructions on reverse)



to lease type of print legions. See instructions on rev	erse.)
To the SECRETARY OF STATE, STATE OF IDAHQUE 20 Pursuant to Section 53-504, Idaho Code, the under gives notice of adoption of an Assumed Business N	signed
The assumed business name which the undersigned u business is:	se(s) in the transaction of
DAIRY MANAGEMENT & VETERINAL Take 2. The true name(s) and business address(es) of the entit	
business under the assumed business name is/are:	y or manadal(s) doing
Name RICHARD E. GUTIERREZ 493 N. S.	omplete Address
RICHARD E. GUTIERREZ 493 N. S. SHARON SMITH 493 N. S.	ady Grove Ct. Kuna ID
	ansportation and Public Utilities nance, Insurance, and Real Estate ning
correspondence should be addressed:	Pr (optional): <u>922-3343</u>
DR. Richard E. Gutierrez	Submit Certificate of Assumed Business Name and \$20.00 fee to:
8422 Bennett Road, Nampa, ID 83686	Secretary of State 700 West Jefferson
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Basement West PO Box 83720
DR RICHARD E. GUTIERREZ	Boise ID 83720-0080 208 334-2301
493 N. Shady Grove Ct.	Secretary of State use only
Signature Cuchant C Vut	IDAHO SECRETARY OF STATE
Orginaldies Clorals C	DATE 06/20/1997 0900 104117 3
Printed Name: BICHARD E. GUTIERREZ	CX #: 5145 CUST# 83242

i€ 20.00= 20.00

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