

CERTIFICATE OF ASSUMED BUSINESS **FILED**

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name



1. The assumed business name which the undersigned use(s) in the transaction of business is:

LANDA FARMS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Julian Landa</u>	<u>Route 1 Box 1146 Johnstone Rd Homedale, ID 83628</u>
<u>Dan Landa</u>	<u>Route 1 Box 1134 A Y Rd, Homedale, ID 83628</u>
<u>Larry Landa</u>	<u>Route 1 Box 1155 A W Thompson Rd., Homedale, ID 83628</u>
<u>Chris Landa</u>	<u>Route 1 Box 226, Marsing, ID 83639</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input checked="" type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed:

Julian Landa
Route 1 Box 1146 Johnstone Rd
Homedale, ID 83628

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: Julian Landa

Printed Name: Julian Landa

Capacity: _____

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

07/30/1999 09:00
CK: 1572967 CT: 15877 BH: 238147

1 @ 20.00 = 20.00 ASSUM NAME IN 2

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