



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED EFFECTIVE

08 DEC 30 AM 8:26

SECRETARY OF STATE
STATE OF IDAHO

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

HARVEST Fellowship

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

Name

Complete Address

BRUCE KIRBY

213-3rd AVE E, TWIN FALLS, ID 83301

BEVERLY KIRBY

213-3rd AVE E, TWIN FALLS, ID 83301

KAY WOLVERTON

289 CEDAR PARK CIRCLE, TWIN FALLS, ID 83301

GARY CUSTER

438 HIGHWAY 74, TWIN FALLS, ID 83301

3. The general type of business transacted under the assumed business name is:

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

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

HARVEST Fellowship

213-3rd AVE EAST

TWIN FALLS, ID 83301

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

GARY CUSTER

438 HWY 74

TWIN FALLS, ID 83301

Signature: X Mary Q

(signature required)

Printed Name: GARY CUSTER

Capacity/Title: TREASURER

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

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IDAHO SECRETARY OF STATE
12/30/2008 05:00
CK: 2479 CT: 200491 BH: 1150037
1 @ 25.00 = 25.00 ASSUM NAME # 2