



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2005 FEB 23 AM 8:39

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY
STATE OF IDAHO

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

VIERSTRA Dairy

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
<u>MIKE & SUSAN VIERSTRA</u>	<u>2588 E 3500 N</u>
	<u>TWIN FALLS IDAHO</u>
	<u>83301</u>

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 type="checkbox"/> Services | <input checked="" 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:

MIKE & SUSAN VIERSTRA
2588 E 3500 N
TWIN FALLS IDAHO 83301

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

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

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

Phone number (optional):

732-0576

Secretary of State use only

Signature: Mike Vierstra

(signature required)

Printed Name: MIKE VIERSTRA

Capacity/Title: Owner

(see instruction # 8 on back of form)

9/10/01 form 1.001.001 p65
Revised 04/2003

IDAHO SECRETARY OF STATE
02/23/2005 05:00
CK: 5756 CT: 158018 BH: 794619
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 84857