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

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.	
The assumed business name which the und	ersigned use(s) in the transaction of
business is: ROCKING V Farms	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Torking Lee Veien	Complete Address Dal Veien Road
Rebecca Low Veien /	Troy, Id 83871
3. The general type of business transacted und	der the assumed business name is:
Retail Trade Manufacturing Transportation and Public Utilities Agriculture Services Mining	
 The name and address to which future Ph correspondence should be addressed: 	one number (optional): (208)835-5263
Rocking V Farms Tor & Becky Veien	Submit Certificate of Assumed Business Name and \$20.00 fee to:
1021 Veien Rd. Troy LTd 83671 5. Name and address for this acknowledgment copy is (if other than #4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only 1DAHO SECRETARY OF STATE
gnature: To Veen	1DAHO SECRETARY OF STATE 8
	1 @ 20.66 = 26.86 ASSUM NAME # 2

Sig

Printed Name: Tortinh Lee Veien

Capacity: Owner

(see instruction # 8 on back of form)

D31582