

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED

00 JAN 26 AM 10:28

SECRETARY OF STATE
STATE OF IDAHO

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

Broken Circle Castle Company

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	Address
<u>TED W Hoffman</u>	<u>Rt 1 Box 815 Mtn Home ID 83447</u>
<u>Rita S Hoffman</u>	<u>IL</u>

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

Agricultural

See categories on the reverse

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

TED Hoffman Rt 1 Box 815 Mtn Home ID 83447

Signed

T W Hoffman

By

TED Hoffman

Capacity

owner

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

234
2300
Business
Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

01/26/2000 09:00

CK: 230 CT: 71774 BH: 204532

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 1096

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