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

OF STATE, STATE OF IDAHO

Code the undersigned

	gives notice of adoption of an		ness name.
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	Simplot Partners		
			The second
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	Co	mplete Address つうしゃ
	J.R. Simplot Company	999 Main Stre	eet, Suite 1300
	C 28407	P.O. Box 27	
		Boise, Id 83702-0027	
The general type of business transacted under the assum (mark only those that apply)			umed business name is:
	Retail Trade Manufactu Wholesale Trade X Agriculture Services Construction	e 🔲 Fin	ansportation and Public Utilities nance, Insurance, and Real Estate ning
4.	The name and address to which future correspondence should be addressed: Phone number (optional): (208) 389-7313		
	Ronald N. Graves, Secretary		Submit Certificate of
	J.R. Simplot Company		Assumed Business
	J.K. Bimplot Company		Name and \$20.00 fee to:
5.	999 Main Street, Suite 1300, P.O. Box 27 Boise, ID 83702-0027 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
		0	Secretary of State use only IDAHG SECRETARY OF STATE
		n 12/98	98/18/2000 09:00
	() . <i>y</i>	Revision 12/99	CK: 175379 CT: 1371 BH: 342074
Signat	ure: June Mour		1 0 20.00 = 20.00 ASSUM NAME # 2
Printed	Name: Ronald N. Graves, Secretary	bn.p65	D 00050
Capac	ity:	orms\abn.p65	レ もとグラク

(see instruction # 8 on back of form)