



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

2006 JUN -9 AM 9:27

SECRETARY OF STATE
STATE OF IDAHO

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

Hidden Orchard Farm

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

Name

Theresa D'Amore

Norbert Lane

Complete Address

90 N. Ethel Drive, Nampa, ID 83687

90 N. Ethel Drive, Nampa, ID 83687

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" 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 | |

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

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

Theresa D'Amore

90 N. Ethel Drive

Nampa, ID 83687

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

Phone number (optional):

208-461-3735

Secretary of State use only

Signature: Theresa D'Amore

(signature required)

Printed Name: _____

Theresa D'Amore

Capacity/Title: _____

Owner

(see instruction # 8 on back of form)

g:\comp\forms\id\assum\idassum.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
06/09/2006 05:00
CK: 3181 CT: 194634 BH: 959083
1 @ 25.00 = 25.00 ASSUM NAME # 2

D100690