Printed Name: _Michael

(see instruction # 8 on back of form)

Capacity:

CERTIFICATE OF ASSUMED BUSINESS NAME (Classes type or print legibly. See instructions on reverse) (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. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Borkoski Enterprise Farms 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address A. Burkouk, 8689 N. Rude 4+ Haysen, Id 8304 Dichapl 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Construction Services Mining 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: Michael A. Borkoski Submit Certificate of Assumed Business 9685 N. Rude St Name and \$20.00 fee to: Hayden, Id 83835 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State Has Gulf 04/03/2001 09:00 CK: 2148 Cf: 144475 BH: 388627 Signature:

1 9 20.86 = 28.88 ASSUM NAME # 2

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