CERTIFICATE OF ASSUMED BUSINESS NAMEFECTIVE (Please type or print legibly. See instructions on 18 VERSE) AM 9: 06

To the SECRETARY OF STATE, STATE OF IDAHO

	Pursuant to Section 53-504, Id	laho Code, the Assumed Busi	undersigner OF IDAHO
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	Niemar Farms		
2.	he true name(s) and business address(es) of the entity or individual(s) doing usiness under the assumed business name is/are:		
	Name	Co	mplete Address
	Niel Hergert	11342 Orcha	rd Ave., Nampa, ID. 83651
	Marie Hergert .	11342 Orcha	rd Ave., Nampa, ID. 83651
3.	he general type of business transacted under the assumed business name is: (mark only those that apply)		
	Retail Trade Manufacturi Wholesale Trade Agriculture Services Construction	Fin	ensportation and Public Utilities ance. Insurance, and Real Estate ning
4.	. The name and address to which future Phone number (optional): correspondence should be addressed:		
	Niel Hergert		Submit Certificate of
	11342 Orchard Ave.		Assumed Business
	TATAL VILLIAND AVE.		Name and \$20.00 fee to:
Nampa, ID. 83651 5. Name and address for this acknowledgment copy is (if other than # 4 above): Bank of the West		ent	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	1463 West Park Plaza		Secretary of State use only
C:	Ontario - OR. 97914	Revision 12/99	IMHO SECRETARY OF STATE
Signatu			CK: 1388 CT: 68982 BH: 316118
Printed	Name: Niel Hergert	n.p65	1 8 28.00 = 20.00 ASSUM HAME # 2
Capaci	ty: Owner	pVorms\abn.p65	N = -1
	(see instruction # 8 on back of form)) Ad	D 35626