	CERTIFICATE OF ASSUM (Please type or print legibly. See	e instructions on reverse.)	
gives notice of adoption of an Assumed Business NameSTATE OF STATE		o Code, the undersigned CTAPY OF 34 umed Business Name STATE OF 10 STATE	
1. The assumed business name which the undersigned use(s) in the transaction of 0			
	business is: Forest Springs	LLC,	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Pippin Name Plantation LLC,	Complete Address	
	PIPPIN Plantation LLC,	Sagle, ID. 83860	
	<u> </u>	TOT C -C - 10 H . CD	
	The Road Changed names th	e Old Address is. sole, to 83860	
3.	The general type of business transacted under the assumed business name is:     (mark only those that apply)		
	☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining	
4.	The name and address to which future Ph correspondence should be addressed:	one number (optional): (208) 263-272(	
	Frances Hillebrand	Submit Certificate of	
	1507 Sagle Green RD.	Assumed Business Name and <b>\$20.00</b> fee to:	
	Sagle, ID. 83860		
		Secretary of State 700 West Jefferson	
5.	Name and address for this acknowledgment copy is (if other than # 4 above).	Basement West PO Box 83720	
	Charlie Hillebrand	Boise ID 83720-0080	
	1507 Sagle Creek RD.	208 334-2301	
		Secretary of State use only  SECRETARY OF STATE	
	Sagle, FD 83860	INHO SECRETARY OF STATE  12/06/2000 09:00  CK: 594 CT: 114126 Mt: 365000	
Signature: Value / paratice			
_ , , , , , , , , , , , , , , , , , , ,			
Capac	ity:(see instruction # 8 on back of form)	D41094	