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

To the SECRETARY OF STATE, STATE OF IDAHO

( ± 0	Pursuant to Section 53-504, Ida gives notice of adoption of an A	
1.	The assumed business name which the ur business is:	
	Back Country feed	+ Supply
2.	The true name(s) and business address(es business under the assumed business nar	
	Terrix L. Ryals	Complete Address  824 S Millefork
	Stevea. Ryak	Gardenvalley, IR 83622
3.	The general type of business transacted u (mark only those that apply)	under the assumed business name is:
	Retail Trade	Finance, Insurance, and Real Estate  Mining
4.	correspondence should be addressed:	Phone number (optional): 462-3601
	Steve aaron Ryals	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	17 Leisurehn.  6arden valley, ID 83622  Name and address for this acknowledgme 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
		Secretary of State use only IDAHO SECRETARY OF STATE
Signat	ure: <u>Servie</u> L. Rypls	63/18/1998 09:00 CK: CASH CT: 95911 BH: 92867 1 8 29.86 = 29.88 ASSUM MAME
Printed Capac	ity: Name: Terrichynne Ryals	D13157
•	(see instruction # 8 on back of form)	kompilos