

Printed Name:

Capacity/Title:\_

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2001 JAH -8 AH 8: 34

Sinde OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> <li>Meyer Livestock</li> </ol>	
2. The true name(s) and business ad business under the assumed business was also business and b	Idress(es) of the entity or individual(s) doing ness name:  Complete Address  1058 Fast 900 South  Albion Tdaho 833//
Retail Trade Trans Wholesale Trade Cons	S Journal Edoliness
4. The name and address to which fur correspondence should be address  Meyer Live Sto  1058 E 9005  Albion I Jaho 8	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
5. Name and address for this acknown copy is (if other than # 4 above):  Meyer Live S7	208 731 1885 CEll 208 673 6771 Home
1058 = 9005 Albion Idaho 8	Secretary of State use only

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IDAHO SECRETARY OF STATE

01/08/2004 05 = 00

CK: 91631432362 CT: 158010 BH: 720579

1 6 25.08 = 25.00 ASSUM MANE # 2

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