

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on other page)

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:

Poverty Flats Farm, A Partnership

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

Mark Stanger
Kevin Stanger

3728 North 3700 East, Kimberly, ID 83341
4001 East 3200 North, Hansen, ID 83334

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐
☐
☐

Retail Trade
Wholesale Trade
Services

☐
☒
☐

Manufacturing
Agriculture
Construction

☐
☐
☐

Transportation and Public Utilities
Finance, Insurance, & Real Estate
Mining

Phone number (optional): _____

4. The name and address to which future correspondence should be addressed:
4001 East 3200 North, Hansen, ID 83334

5. Name and address for this acknowledgement copy is (if other than #4 above):
WELLS FARGO BANK NORTHWEST, N.A.
BBG-BOISE LOAN OPERATIONS CENTER
PO BOX 8203 (MAC #U1851-015)
BOISE ID 83707-2203

Submit Certificate of
Submit Certificate of Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: _____

Printed Name: Mark Stanger

Capacity: General Partner
(see instruction #8 on other sheet)

INSTRUCTIONS

IDAHO SECRETARY OF STATE
05/01/2003 05:00
CK: 335202490 CT: 50009 BH: 677997
1 @ 25.00 = 25.00 ASSUM NAME # 3

D 64980