FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

2012 OCT 29 AM 10: 05 SECRETARY OF STATE

submits for filing a certificate of Assur	
Please type or print legible	
NOTE: See Instructions on reverse	beinia milia.
1. The assumed business name which the business is:	e undersigned use(s) in the transaction of
AGRIfinancial Services	
The true name(s) and business address business under the assumed business. Name	name: Complete Address
CGB AGRI FINANCIAL SERVICES, INC.	1111 W. Jefferson Suite 530, Boise, ID 83702
3. The general type of business transacte Retail Trade Transport Wholesale Trade Construct Services Agricultur	tation and Public Utilities
Manufacturing Mining Finance, Insurance, and Real Es	Assumed Business
The name and address to which future correspondence should be addressed. On Mattern	I manage to the first term of the contract of
1111 W Jefferson Suite 530	Boise ID 83720-0080
Bolse, ID 83702	208 334-2301
5. Name and address for this acknowled copy is (if other than # 4 above).	dgment Phone number (optional): 5027219446
Legalzoom.com, inc. c/o Karla Figueroa	
101 N. Brand Blvd., 10th Floor	Secretary of State use only
Glendale, CA 91203	
ignature: No mutto	Proceeding and Period and public to the second and
rinted Name: Don Mattern	Rewindusts from Free and Control of Control
apacity/Title: Vice President	
(see instruction # 8 on back of form)	

IDAHO SECRETARY OF STATE

10/29/2012 05:00

CK: 1178031 CT: 172099 BH: 1345396

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