



# 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**

2002 FEB 13 AM 11:45

SECRETARY OF STATE  
STATE OF IDAHO

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

1. The assumed business name which the undersigned use(s) in the transaction of business is:

MILLER FARMS

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

Name

ROBERT D. AND JUNE M. MILLER

Complete Address

7625 HOVE ROAD

MELBA, IDAHO 83641

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input checked="" type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

ROBERT D. MILLER

7625 HOVE RD.

MELBA, ID 83641

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

495-2876

Signature:

Printed Name: ROBERT D. MILLER

Capacity/Title: OWNER OF SOLE PROPRIETORSHIP

(see instruction # 8 on back of form)

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Revised 01/2001

Secretary of State use only

IDAHO SECRETARY OF STATE  
02/11/2002 05:00  
CK: 3404 CT: 125970 BH: 445514  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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