

CERTIFICATE OF ASSUMED BUSINESS NAME

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

STATE OF IDAHO

N. T. C. C.

Please type or print legibly.
NOTE: See instructions on reverse before filing.

Dogg	ett Livestocl	K
The true name(s) and business address(business under the assumed business na	ame:	entity or individual(s) doing Complete Address IO Jade Circle Kimberly, ID 83341
3. The general type of business transacted		
Retail Trade Transportati Wholesale Trade Constructio Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat 4. The name and address to which future correspondence should be addressed: Cory and Aimee Doggett 440 Jade Circle Kimberly, ID 83341 5. Name and address for this acknowledged	n te - -	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
CODY is (if other than # 4 above):		Secretary of State use only
gnature:	g/corp/forms/abn forms/abn.p65	D72045
apacity/Title: Co-Owner (see Instruction # 8 on back of form)	g:\ccup\form	IDAHO SECRETARY OF STATE Ø1/13/2004 Ø5 = CK: 5834 CT: 158010 BH: 72 1 8 25.00 = 25.00 ASSUM NA