## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 DEC 17 AM 8: 39

SECREMARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

<ol> <li>The assumed business name white business is:</li> </ol>	ch the undersigned use(s) in the transaction of
	SEXTON FARMS
The true name(s) and <u>business</u> a business under the assumed bus <u>Name</u> DALLAS SEXTON	ddress(es) of the entity or individual(s) doing ness name: <u>Complete Address</u> PO BOX 65 HARVARD ID 83834
Retail Trade Trar Wholesale Trade Cor	Pal Estate Name and \$25.00 fee to:  Secretary of State
5. Name and address for this acknown copy is (if other than # 4 above):	wledgment Secretary of State use only
Signature: 1 Jahlas Salla	
Printed Name: DALLAS SEXTON	
Capacity/Title: OWNER	IDAHO SECRETARY OF STATE
Signature:	12/17/2010 US:00
Printed Name:	1 0 25.00 = 25.00 ASSUM NAME #
Capacity/Title:	

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