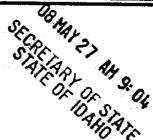
## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

TE: See instructions on reverse before filing.



NOTE: See instructions on reverse before filing.	
1. The assumed business name which the undersigned use(s) in the transaction of business is:  Breath of Heaven Farm	
<ul> <li>2. The true name(s) and business address(es) business under the assumed business name Name</li> <li>Crant A Tohnson Shelle o Tohnson</li> <li>3. The general type of business transacted under the assumed business address(es) business address(es) business address(es)</li> </ul>	Complete Address  2856 N. Grensferry Pd.  Post Falls ID 838Py
	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Roice ID \$2720 0000
Name and address for this acknowledgmer copy is (if other than # 4 above).	Secretary of State use only
Signature: Shelly Tohnson  Capacity/Title: Office Monago  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE    STATE   ST