227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 SEP 30 AM 8: 30

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

business under the assumed busines	
<u>Name</u>	<u>Complete Address</u> 3273 E. 500 N. Lewisville, ID 83431
DuWayne Skaar	
Justin Skaar	454 N. 3700 E. Rigby, ID 83442
	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed Skaar Brothers Farms, A Partnership 421 N. 3200 E.	450 North 4th Street PO Box 83720 Boise ID 83720-0080
Lewisville, ID 83431	208 334-2301
5. Name and address for this acknowle copy is (if other than # 4 above):	edgment
	Secretary of State use only
gnature: <u>Alleg Skaar</u>	 ·
nted Name: DuWayne Skaar	
pacity/Title General Partner	

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