

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

08-DEC -2 AM 8:07

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

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:

Howard Farms

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

Name

Complete Address

Roger Howard 212 3rd Ave. West P.O. 217
Eleanor Howard 217 3rd Ave. W. P.O. Box 217
Andrew Howard 116 S. 8th Ave. West
Marsing Idaho 83639

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 | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Howard Farms
Roger Howard
P.O. Box 217
Marsing Id. 83639

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

Signature:

Roger C. Howard
(signature required)

Printed Name:

Roger C. Howard

Capacity/Title:

Partner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\abn form\abn.pdf
 Revised 04/2003

IDAHO SECRETARY OF STATE
 12/02/2008 05:00
 CK: 4586 CT: 158018 BH: 1146341
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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