

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

93 SEP 14 PM 1:16
FILED
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Idaho Blue Ribbon Produce

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

Name

Complete Address

Idaho Blue Ribbon Products, Inc.

7C96456

102 Fillmore

Twin Falls, ID 83301

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

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

Phone number (optional): 735-6677

102 Fillmore
Twin Falls, Idaho 83301

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

J. Walter Sinclair
Benoit, Alexander, Sinclair, Harwood & High, LLP
P.O. Box 366
Twin Falls, ID 83303-0366

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature:

Printed Name: Ralph E. Jones

Capacity: President

(see instruction #8 on back of form)

IDAHO SECRETARY OF STATE

09/14/1999 09:00
CK: 5120 CT: 120501 IN: 249694

1 @ 20.00 = 20.00 ASSUM NAME # 2

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