## CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice
adoption of an Assumed Business Name.
1. The assumed business name which the undersigned use(s) in the transaction of ⊇ business is:
Lone Mountain Arobians # 8
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:
Name Address
Nancy K. Burtard 3305 W. Seasons Rd. Athol ID Jeffrey D. Burtard 3305 W. Seasons Rd Athol ID
Jettrey D. Durtard 3305 W. Seasons Kd Athal ID
3. The general type of business transacted under the assumed business name is:
# 1 (agriculture) I #
See categories on the reverse
4. The name and address to which correspondence should be addressed:
Nancy & Jeffrey Burtard
3305 W. Seasons Rd Athol ID 83801
Signed Manget. Switard 12/29/198
By
Capacity president
Submit Certificate of Assumed Customer #
Business Name and \$20.00 fee to:
Secretary of State use only 6 1/04/1999 09:00  Secretary of State use only 6 1/04/1999 09:00  CK: 1281 CT: 189868 BH: 175341
Secretary of State 700 West Jefferson PO Box 83720  CK: 1261 CT: 189868 BH: 175341  1 9 28.68 = 28.88 ASSUM HAME 1 2 '
PO Box 83720 Boise ID 83720-0080
D 21690