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CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B Please type or print legibly.	ne undersigned
Instructions are included on back of app	STATE OF IDAHO
1. The assumed business name which the un business is: Faith First Farm	dersigned use(s) in the transaction of
The true name(s) and <u>business</u> address(es business under the assumed business name)	ne:
Name	Complete Address
Ronald H Matthews	3023 B E 3400 N Twin Falls, ID 83301
Sandra M Matthews	3023 B E 3400 N Twin Falls, ID 83301
 3. The general type of business transacted ur Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Ron and Sandra Matthews 3023 B E 3400 N Twin Falls, ID 83301 	n and Public Utilities Submit Certificate of Assumed Business
5. Name and address for this acknowledgment COPY is (if other than # 4 above): Signature: Drinted Name: Ronald Matthews	Secretary of State use only
Printed Name: Ronald Matthews Capacity/Title: Owner Signature:	IDAMO SECRETARY OF STATE 04/30/2015 05:00 CK:523 CT:309675 BH:147342 10 25.00 = 25.00 ASSUM NAME
Printed Name: Sandra Matthews	
Capacity/Title: Owner	D178699