CERTIFICATE OF ASSUMED BUSINESS NAME

22 7	
CERTIFICATE OF	02. 80
ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the u submits for filing a certificate of Assumed Busin	Indersigned System All College
Please type or print legibly. NOTE: See instructions on reverse before fi	iling.
The assumed business name which the unders business is:	signed use(s) in the transaction of
HARVEST	TIME
The true name(s) and business address(es) of business under the assumed business name: Name Kristine Sturm	the entity or individual(s) doing Complete Address P.O. Box 792, Ashton, ID 83420
Konie Pipes	386 North 4050 East, Rigby, ID 83442
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Konie Pipes 386 North 4050 East, Rigby, ID 83442	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
5. Name and address for this acknowledgment copy is (# other than # 4 above):	Secretary of State use only
	ing the state of t
Signature: Kome Pipes (algorithm)	
Printed Name: (Nonie Pipes	(† 1998) maj gekolokus Ludak tipe gibbak
Capacity/Title: co-partner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 12/06/2007 05:00 CK: 4633 CT: 156616 BH: 1888441 1 0 25.00 = 25.00 ASSUM NAME # 2

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