Signature: 1

Capacity:

Printed Name:

Brad Ralphs

(see instruction # 8 on back of form)

Owner

CERTIFICATE OF ASSUMED BUSINESSMAN (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. 1. The assumed business name which the undersigned use(s) in the transaction business is: B & R Farms 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 P.O. Box 174, Rockland, ID. 83271 Brad Ralphs 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Minina 4. The name and address to which future Phone number (optional): ___ correspondence should be addressed: Brad Ralphs Submit Certificate of P.O. Box 174 **Assumed Business** Name and \$20.00 fee to: Rockland, ID. 83271 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (If other than # 4 above); PO Box 83720 Boise ID 83720-0080 Washington Mutual Bank 208 334-2301 1110 Call Creek Dr. #7 Secretary of State use only Pocatello, ID. 83271

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IDAHO SECRETARY OF STATE CK: 881413413 CT: 97112 BH: 453644 1 8 20.00 = 20.00 ASSUM NAME # 2