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(	CEF	TIFICATE OF ASSUMED BU (Please type or print legibly. See instruction	SINESS NAME ns on reverse.) FIL	F
	То	the SECRETARY OF STATE, STATE OF ID/ Pursuant to Section 53-504, Idaho Code, gives notice of adoption of an Assumed B	he undersigned	
1	1. The assumed business name which the undersigned use(s) in the transaction of business is: STATE OF IDAHO			
		Lierman 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:			doing
		<u>Name</u> Shane Lierman	950 South 400 West	Burley, Idaho 83318
		Jeanette Lierman	950 South 400 West	Burley, Idaho 8.318
	<ul> <li>3. The general type of business transacted under the assumed business name is: (mark only those that apply)</li> <li>Retail Trade</li> <li>Manufacturing</li> <li>Transportation and Public Ution</li> <li>Wholesale Trade</li> <li>Services</li> <li>Construction</li> <li>Mining</li> <li>4. The name and address to which future correspondence should be addressed:</li> </ul>			Public Utilities , and Real Estate
		Lierman Farms	Submit Certific Assumed Busin	
		950 South 400 West	Name and \$20	
	5.	Burley, Idaho 83318 Name and address for this acknowledgmen copy is (if other than #4 above):	Secretary of St 700 West Jeffe Basement Wes PO Box 83720 Boise ID 83720 208 334-2301	rson it
F	Printe	ture: <u>Shane Jenne</u> ed Name: <u>SHANE LIERMAN</u> city: <u>President/OWNET</u>	Secretary of Stat IDAHO SECRETARY ( 03.3/2.6/1996 0X: 547 CT: 96837 1 8 28.08 = 28.1 D 1 3 2	DF STATE B (8) (9) : (4) (2) IN: 92(924 ISB ASSUM WANE
		(see instruction # 8 on Eack of form)	0 tearphi	

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C. S. Manakara, Proc. P.

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