

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing. 09 MAR 23 AM 9: 02

SECRETARY OF STATE STATE OF IDAHO

ROGERS F	RANCH	
The true name(s) and business address(es) or business under the assumed business name: Name W GARY ROGERS	f the entity or individual(s) doing Complete Address 3946 W 2200 N, ARCO, ID 83213	· · · ·
PAMELA A ROGERS	3946 W 2200 N, ARCO, ID 83213	
3. The general type of business transacted unde Retail Trade Transportation ar Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ROGERS RANCH		
3946 W 2200 N	(208) 334-2301	
ARCO ID 83213		
 Name and address for this acknowledgment copy is (if other than # 4 above). 	. + + + + + + + + + + + + + + + + + + +	
BANK OF IDAHO		2-1
PO BOX 126	Secretary of State use only	
ST ANTHONY, ID 83445 Signature: Whenter required Printed Name: [1], Cara harrs	IBANG SECRETARY OF STI See 3 / 23 / 2009 9 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	
Capacity/Title: Sole Droprie for	IBAHO SECRETARY OF STI	ATE 5 = 0
(see instruction # 8 on back of form)	1 8 25.86 = 25.88 ASSIM	1162