



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.

10 JUL 14 AM 8:44

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

PRAIRIE FARMS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

VAL HAMMOND

Complete Address

2050 E 600

ST ANTHONY, ID 83445

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☒ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

4. The name and address to which future correspondence should be addressed:

2050 E 600 N

ST ANTHONY, ID 83445

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 (if other than # 4 above):

BANK OF IDAHO

PO BOX 126

ST ANTHONY, ID 83445

Signature: _____

(signature required)

Printed Name: _____

VAL HAMMOND

Capacity/Title: _____

OWNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\stbn formstbn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
07/14/2010 05:00
CK: 54283 CT: 158010 BH: 1238547
1 @ 25.00 = 25.00 ASSUM NAME #

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