



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.

02 FEB 27 AM 10:04

STATE OF IDAHO

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

Featherberry Farm

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

Name

Kristine C. Jackson

Complete Address

PO Box 459, 1095 E. Rock Creek Rd

Potlatch, ID 83855-0459

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input checked="" type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and **\$20.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Kristine C. Jackson

PO Box 459

Potlatch ID 83855-0459

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208/875-1694; FAX 8876

Secretary of State use only

Signature: Kristine C. Jackson

Printed Name: KRISTINE C. JACKSON

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE
02/27/2002 05:00
CK: 3877 CT: 157919 BH: 448748
1 @ 20.00 = 20.00 ASSUM NAME # 2

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