



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2004 OCT 28 AM 9:05

SECRETARY OF STATE OF IDAHO

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

1. The assumed business name which the undersigned use(s) in the transaction of business is: Prairie Home FARM  
Pravay here farm

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

Name	Complete Address
<u>Linda Swenson</u>	<u>7790 N. Atlas RD CPA &amp; P 83815</u>
_____	_____
_____	_____

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 \$25.00 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:

Linda Swenson - Pravay here farm  
7790 N. Atlas RD  
CPA & P 83815

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

Phone number (optional): \_\_\_\_\_

Signature: [Handwritten Signature]  
(signature required)

Printed Name: Linda Swenson

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

PS1397

IDAHO SECRETARY OF STATE  
**10/28/2004 05:00**  
CK: NO CK # CT: 158010 BH: 773546  
1 @ 25.00 = 25.00 ASSUM NAME # 2