

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE
11 JUN -8 AM 9: 07

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

SECRET BY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is: Springwater Friesians	
2. The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u>	es) of the entity or individual(s) doing nme: Complete Address 8421 N VOQT Rd
Itrism KPolke	Hauser IO 83894
3. The general type of business transacted of Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	on and Public Utilities n Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Whish Porter DVM MPA 8421 N vogt Rd Itauser ID 83854	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgm copy is (if other than #4 above): 	pent
	Secretary of State use only
nature: Krista Portel spacity/Title: Partner	-
gnature:	IDAHO SECRETARY OF STATE @6/08/2011 @5:00 CK: 3846 CT: 259595 BH: 1277353 1 0 25.00 = 25.00 ASSUM NAME #

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