

## **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.

2003 APR 18 AM 9: 10

NOTE: See instructions on reverse k	pefore filing.  State OF IDAHO  STATE OF IDAHO
The assumed business name which the business is:  M.B. Livestock	state of IDAHO state of IDAHO sundersigned use(s) in the transaction of sies of the entity or individual(s) form
2. The true name(s) and business address business under the assumed business r  Name  Michael Bott  Deris Bott	
3. The general type of business transacted  Retail Trade Transportat Wholesale Trade Services Agriculture	ion and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  Michael Bott  75 N 200 W  Rupert Id 83350	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgn copy is (if other than # 4 above):  D. L. EVANS BANK 318 S. ONEIDA	ment Phone number (optional):
Signature: Millians (signature required)	Secretary of State use only  500 ugasumoj ugasum
Printed Name: <u>Michael</u> Bott	IDAHO SECRETARY OF STATE  ### Company of Com
Capacity/Title: owner	CK: 17520 CT: 1717 BH: 682604 1 € 25.00 = 25.00 ASSUM MANE # 2

(see instruction # 8 on back of form)