

# CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

97 JUN -2 AM 11:05

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SECRETARY OF STATE

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STATE OF IDAHO

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

THE RIP WIND ACCOUNT

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

<u>Name</u>	<u>Address</u>
<u>Alva V. Baker</u>	<u>PO Box 447, Bonners Ferry, ID 83805</u>
<u>Elva M. Baker</u>	<u>PO Box 447, Bonners Ferry, ID 83805</u>

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

Farming

See categories on the reverse

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

PO Box 447, Bonners Ferry, ID 83805

Signed

Elva M. Baker  
Alva V. Baker

By

Capacity

(Owner)

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

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE  
DATE 06/02/1997  
0900 97799 2  
CK #: 6698 CUST# 82253  
ASSUM NAME 10 20.00= 20.00

#: D 5079