

## **CERTIFICATE OF AUTHORITY OF**

ROBA, INC.	
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I, PETE T. CENARRUSA,	Secretary of State of the State of Idaho, hereby certify the
duplicate originals of an Application	on ofROBA, INC.
fo	or a Certificate of Authority to transact business in this Stat
duly signed and verified pursuant	to the provisions of the Idaho Business Corporation Act, have
been received in this office and ar	re found to conform to law.
ACCORDINGLY and by virt	tue of the authority vested in me by law, I issue this Certificate
Authority to ROBA, 2	INC.
to transact business in this State un	nder the name ROBA, INC.
	and attach hereto a duplicate original of the Applicatio
for such Certificate.	
Dated July 22, 1991	
AT SEA	
CA COMPANY OF THE PARK OF THE	Set or Cenarine
	SECRETARY OF STATE
HESALIDO	SECRETARY OF STATE
ELLE	D - 2440
	Corporation Clerk
	Corporation Clerk
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## APPLICATION FOR CERTIFICATE OF AUTHORITY

(Profit Corporation)

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o the Sectionary ph State of Idal	10		SE SE
		gned Corporation hereby appl	
Pursuant to Section 30-1-1:  utherithe transport business in	your State, and for that pur	rpose submits the following sta	tement;
l. The name of the corporation	is Roba. Inc.		
•		· · · · · · · · · · · · · · · · · · ·	3
2. The name which it shall use i	n Idaho is as above		g
(To be used only when requ Board of Directors resolution		a name already on file. Must i Idaho.)	be accompanied by a
3. It is incorporated under the l	aws of Washington		
4. The date of its incorporation	is 9-25-69	and the	period of its duration
is Pe	rpetual		
5. The address of its principal of	office in the state or country	under the laws of which it is in	corporated is
W. 1401 Northwe	est Blyd. Spokan	e, WA 99205	
6. The address to which corresp	pondence should be addresse	d, if different from that in iten	n 5.
as above			
		<u>, , , , , , , , , , , , , , , , , , , </u>	
7. The street address of its prop	osed registered office in Idah	o is E 1808 -	19th
Lewiston ID	83501	, and the	
	m!		s name of its proposed
registered agent in Idaho at t	hat address is	a COOK	
3. The purpose or purposes wh	ich it proposes to pursue in t	the transaction of business in I	daho are:
D/B/A Hicke	ory Farms of Ohio		
	Foods - Retail		
	Foods - Retail	officers are:	
	Foods - Retail	officers are:	
P. The names and respective ad	Foods - Retail Idresses of its directors and o		r Rd.
Name Robert O. Anderso	Foods - Retail Idresses of its directors and Office On President	Address S. 6624 Ben Bur	
Name Robert O. Anderso	Foods - Retail Idresses of its directors and office on President cson Secretary/.	Address	
Name Robert O. Anderso	Foods - Retail Idresses of its directors and Office On President	Address S. 6624 Ben Bur	r Rd.
Name  Robert O. Anderso  Marianne J. Ander	Foods - Retail Idresses of its directors and office on President rson Secretary/ Treasurer	Address S. 6624 Ben Bur S. 6624 Ben Bur Spokane, WA 9	r Rd. 9223
Name Robert O. Anderso	Foods - Retail Idresses of its directors and office on President rson Secretary/ Treasurer	Address S. 6624 Ben Bur S. 6624 Ben Bur Spokane, WA 9 Old National Bui	r Rd. 9223 lding
Name  Robert O. Anderso  Marianne J. Ander	Foods - Retail Idresses of its directors and office on President rson Secretary/. Treasurer	Address S. 6624 Ben Bur S. 6624 Ben Bur Spokane, WA 9 Old National Bui	r Rd. 9223
Name  Robert O. Anderso  Marianne J. Ander	Foods - Retail Idresses of its directors and office on President rson Secretary/. Treasurer	Address S. 6624 Ben Bur S. 6624 Ben Bur Spokane, WA 9 Old National Bui	r Rd. 9223 lding

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	Office	Address
	(A) (C. (1997) (	
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10. The corneration accents and	Lahall comply with the provin	sions of the Constitution and the laws of the State of
Idaho.	a snan comply with the provis	sions of the Constitution and the laws of the State of
		orate Status or Existence, duly authenticated by the
	e or country under the	laws of which it is incorporated.
June 25, 1991	· · · · · · · · · · · · · · · · · · ·	
		Dobo Tra
		Roba, Inc. (Corporation Name)
	()	4001
	By Jake	s President/Vice President (please specify)
	It	s micsigent/ vice president/ <i>nionso specitul</i>
	and Mari	anne J. Anderson
cours on Washington	lt	s Secretary/Assistant Secretary (please specify)
STATE OF Washington	) se.	anne J. Anderson
COUNTY OF Spokane	) ss: ))	anne J. Anderson
COUNTY OF Spokane Barbara A Pa	) ss: ) antzar	s Secretary (please specify)
COUNTY OF Spokane Barbara A Pa	) ss: ) antzar	s Secretary / Assistant Secretary (please specify)  , a notary public, do hereby certify that on
COUNTY OF Spokane Barbara A Pa	) ss: ) antzar	s Secretary (please specify)
COUNTY OF Spokane  Barbara A Pa I,	n ) ) ss:) antzar ay ofJune	s Secretary / Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19, personally appeared before
COUNTY OF Spokane  Barbara A Pa I,	n ) ) ss:) antzar ay ofJune	s Secretary / Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19, personally appeared before
COUNTY OF Spokane  Barbara A Pa I,	ay of June	s Secretary / Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19, personally appeared before
COUNTY OF Spokane  Barbara A Pa I,	ay of June	s Secretary / Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19, personally appeared before who being by me first duly sworn, declared that
COUNTY OF Spokane  Barbara A Pa I,	antzar  ay of June  nne J Anderson  retary of Roba	s Secretary / Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19, personally appeared before who being by me first duly sworn, declared that
COUNTY OF Spokane  Barbara A Pa  I,  this 25th d  me Robert O & Marian  * the President & Second	antzar  ay of June  nne J Anderson  retary of Roba	anne J. (Indexes)  s Secretary/Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19
COUNTY OF Spokane  Barbara A Pa I,  this 25th d  me Robert O & Marian  * the President & Second	ay of June  nne J Anderson  retary of Robs  cument as offi	s Secretary / Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19
COUNTY OF Spokane  Barbara A Pa I,  this 25th d  me Robert O & Marian  the President & Secu	ay of June  nne J Anderson  retary of Robs  cument as offi	anne J. (Indexes)  s Secretary/Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19
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RECEIVE SEC. OF SIA

## STATE of WASHINGTON SECRETARY of STATE

## CERTIFICATE OF EXISTENCE/AUTHORIZATION

**OF** 

ROBA, INC.

I, RALPH MUNRO, Secretary of State of the State of Washington, hereby certify that I am the custodian of the corporation records of this state.

I FURTHER CERTIFY that the records on file in this office show that the above - named profit corporation was incorporated under the laws of the State of Washington and was issued a certificate of Incorporation in Washington on SEptember 26, 1969.

I FURTHER CERTIFY that as of the date of this certificate no Articles of Dissolution or Certificate of Withdrawal have been filed, that the conditions of the Revised Code of Washington, Title 23B.01.280(2) (a) through (d) have been met, and the corporation is duly authorized to transact business in the corporate form in the State of Washington.

Date: July 15, 1991 Given under my hand and the seal

Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol.

Ralph Munro, Secretary of State

N. Brown

SSF69A(R5/91)