

Capacity/Title: President

Capacity/Title: Secretary

Rod Nielsen

Signature:

Printed Name:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

12 FEB 17 AM 9: 00

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: Nielsen Brothers Vineyards 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name Pace - Nielsen Farms Inc. 30684 Pearl Road Parma, Idaho 83660 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Manufacturing Minina Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 Pace - Nielsen Farms Inc. Boise ID 83720-0080 30684 Pearl Road 208 334-2301 Parma, Idaho 83660 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only Signature: Printed Name: Chad Nielsen

aion.pmd Rev. 07/2010

IDAHO SECRETARY OF STATE

12/17/2012 05:00

CK: 19750 CT: 267153 BH: 1311253

1 8 25.00 = 25.00 ASSUM NAME # 2