

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 NOV -2 AM 8: 47

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

SECRETARY OF STATE STATE OF IDAHO

	GOLD N GREEN FARM
business under the assumed bus	
<u>Name</u>	Complete Address
J KYLE NELSON	PO BOX 54 TROY ID 83871
MARY C NELSON	PO BOX 54 TROY ID 83871
Retail Trade Trar Wholesale Trade Cor	nsacted under the assumed business name is: esportation and Public Utilities estruction riculture sing Submit Certificate of Assumed Business
Finance, Insurance, and Red 4. The name and address to which	eal Estate Name and \$25.00 fee to:
correspondence should be addre	Secretary or State
PO BOX 54	208 334-2301
TROY ID 83871	
5. Name and address for this ackno copy is (if other than # 4 above):	wledgment
gnature: Will All	Secretary of State use only
inted Name: J KYLE NELSON	
apacity/Title: OWNER	
	-
gnature:	IDAHO SECRETARY OF STATE 11/02/2011 05:00
inted Name:	CK: 79112 CT: 158010 9H: 12966 1 0 25.00 = 25.00 ASSUM NAME
apacity/Title:	

abn.pmd Rev. 07/2010