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Department of Water Resources
JUL 12 2004

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
2084-10580					

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts.
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).

OR

If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s)

COLE CEDAR, INC.

4. New Owner/Claimant(s)

WILLIAM T. COLE, SR. - DBA COLE CEDAR

Name Connector (Check one): ☐ and, ☐ or, ☐ and/or

New Mailing Address

1121 Hwy 11 - WEIPPE, IDAHO 83553 (SAME AS OLD ADDRESS)

City, State and ZIP Code

New Telephone Number

208 435-4186 - same as old number -

5. Date you acquired the property

DISSOLUTION OF COLE CEDAR, INC was 12-28-04

major shareholder acquired COLE CEDAR on 12-28-04

6. If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7. If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

7. Signature of New Owner(s) or Claimant(s) William T. Cole, Sr.
(include title if applicable) DBA Cole Cedar

For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him/her for all matters related to your claims.

For Office Use Only			
Received by <u>PM</u>	Date <u>11-17-05</u>	Fee <u>25.00</u>	
Received by <u>PM</u>	Date <u>11-17-05</u>	Receipt No. <u>C079655</u>	
Processed by _____ AJ	Date _____	WR _____	Date _____



ARTICLES OF DISSOLUTION

(General Business and Professional Corporations)

To the Secretary of State of Idaho
Pursuant to Title 30, Chapter 1 and 13, Idaho Code, the
undersigned corporation has elected to dissolve.

1. The name of the corporation is: **COLE CEDAR, INC.**
1121 HIGHWAY 11
WEIPPE, ID 83553
 2. The date the dissolution was authorized is: DECEMBER 28, 2004
 3. The dissolution was approved by the shareholders as follows:
 - a) The number of shares entitled to vote: 100
 - b) The number voting for dissolution: 100
 - c) The number voting against dissolution: 0
 - 4 (optional) The dissolution shall be effective on DECEMBER 28, 2004
- (The articles will be effective on the date filed with the Secretary of State unless a future date is specified.)

Dated: April 25, 2005

Signature: _____

Typed Name: WILLIAM T. COLE SR.

Capacity: PRESIDENT

Customer Acct # _____

(if using pre paid account)

Secretary of State use only

g-corp/corp forms/articles of dissolution_040105
Revised 07/2002

*COLE
next
4-27-05*

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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.

NOTE: See instructions on reverse before filing.

12-29-04

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

COLE CEDAR

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

Name

Complete Address

WILLIAM T. COLE SR.

1121 Hwy 11

WEIPPE, IDAHO

83553

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☐ Services | ☐ Agriculture |
| ☒ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

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

WILLIAM T. COLE

1121 Hwy 11

WEIPPE, IDAHO 83553

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

(208) 435-4186

Secretary of State use only

Signature: _____

William T. Cole Sr.
(signature required)

Printed Name: WILLIAM T. COLE SR.

Capacity/Title: OWNER-OPERATOR

(see instruction # 8 on back of form)

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Revised 04/2003

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