



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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2006 JUN 26 AM 9:51

SECRETARY OF STATE
STATE OF IDAHO

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

ROPER & ROPER INSURANCE ADVISORS

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

Name

Bethany T. Roper

Complete Address

1135 Rowland Rd

Pocatello, ID 83204

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

<input type="checkbox"/>	Retail Trade	<input type="checkbox"/>	Transportation and Public Utilities
<input type="checkbox"/>	Wholesale Trade	<input type="checkbox"/>	Construction
<input type="checkbox"/>	Services	<input type="checkbox"/>	Agriculture
<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>	Mining
<input checked="" type="checkbox"/>	Finance, Insurance, and Real Estate		

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

Bethany T. Roper

1135 Rowland Rd

Pocatello, ID 83204

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):

208-760-0255

Signature: Bethany T. Roper

(Signature required)

Printed Name: Bethany T. Roper

Capacity/Title: President / CEO

(see instruction # 8 on back of form)

9 corpformstbn formstbn 1065
Revised 04/2003

Secretary of State use only

101283

IDAHO SECRETARY OF STATE
06/27/2006 05:00
CK: 2011 CT: 158010 BH: 962139
1 0 25.00 = 25.00 ASSUM NAME # 2