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CERTIFICATE OF	a destand doub a hit of the second
ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the usubmits for filing a certificate of Assumed Busi	undersigned
Please type or print legibly. NOTE: See instructions on reverse before	iness Name. SECRETARY OF STATE STATE OF IDAHO
 The assumed business name which the undersigned use(s) in the transaction of business is: Community Title of Boundary County 	
The true name(s) and business address(es) o business under the assumed business name:	
Name	Complete Address
Community Title Insurance of Boundary	120 S. Second Street, Sandpoint, ID 83864
County Idaho, LLC	
(W47230)	
 3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate Time and address to which future correspondence should be addressed: 120 S. Second Street Sandpoint, ID 83864 	er the assumed business name is: and Public Utilities 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): Finney Finney & Finney, P.A. 120 E. Lake St, Ste 317 Sandpoint, ID 83864-1366 Signature: Williams Canacity/Title: Manager	Secretary of State use only
Capacity/Title: Manager (see instruction # 8 on back of form)	Ø Ø <thø< th=""> Ø <thø< th=""> <thø< th=""></thø<></thø<></thø<>