

(see instruction #8 on back of form)

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. STATE OF WALLS NOTE: See instructions on reverse before filing.

**************************************	- 1070
 The assumed business name which the under business is: 	ersigned use(s) in the transaction of
Ox Bow Publishing	
The true name(s) and <u>business</u> address(es) of business under the assumed business name:	· · · · · · · · · · · · · · · · · · ·
<u>Name</u>	Complete Address
Newel Kimball	PO BOX 112 950 So. 60 E.
Gloria Kimball	Victor Jano 83465
CIDITA KIMBAN	VICIN, JGANO 83795
The general type of business transacted und	ler the assumed business name is:
Retail Trade Transportation	and Public Utilities
Wholesale Trade Construction	and rubile stilles
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
[Name and \$20.00 fee to:
☐ Finance, Insurance, and Real Estate	1,44,110 2,110 4,200 (6:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
Oxpow Publishing ball	PO Box 83720
20 Bay 112	Boise ID 83720-0080
Vector Itaho 83455	208 334-2301
	Discours I am an
5. Name and address for this acknowledgmen	
COPy IS (if other than # 4 above):	208-787-2921
	Secretary of State use only
\sim	1) 52932
Signature: (Karea Kemball	TRAMO CECOCTADY OF CTATE
Printed Name: Gloria Kimball	IDAHO SECRETARY OF STATE 93/15/2002 95:00 CK: 3949 CT: 158010 BH: 452350 1 0 20.00 = 20.00 ASSUM NAME # 2
Capacity/Title: <u>Co - Owner</u>	1 0 20.00 = 20.00 ASSUM NAME # 2
and the second second	Ö