



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.

FILED EFFECTIVE
2003 MAR 17 AM 9:53
SECRETARY OF STATE
STATE OF IDAHO

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

Syringa Suffolks

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

Donald L McCormick

204 Shingle Mill Road

Edith Ann McCormick

Sandpoint, ID 83864

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:

Don McCormick

204 Shingle Mill Road

Sandpoint, ID 83864

Submit Certificate of
Assumed Business
Name and **\$20.00** 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) 263-~~0000~~ 5652

Signature: _____

Don McCormick
(signature required)

Printed Name: _____

Don McCormick

Capacity/Title: _____

Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\stbn forms\stbn.p65
Revised 09/2002

IDAHO SECRETARY OF STATE
03/17/2003 05:00
CK: 3726 CT: 158810 BH: 668830
1 @ 20.00 = 20.00 ASSUM NAME # 2

D 63549