

Printed Name: ___

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2003-OCT 17 AM 8: 41

STATE OF IDAHO

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.

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

	Name	Complete Address
	Randy Hess	P.O.Box 2733 Ketchum 3
•		er the assumed business name is:
	Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
	The name and address to which future correspondence should be addressed: Randy Hess Po.Box 2733 Ketchum, ID 83340	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
õ,	Name and address for this acknowledgment copy is (fother than #4 above);	Phone number (optional): 208 - 72-6-433/

IDAHO SECRETARY OF STATE 10/17/2003 05:00 CK: 291 CT: 158010 BH: 787013 0 25.00 = 25.00 ASSUM NAME 0 2

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