227	FILED/EFFECTIVE
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504 Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is:	
<u>Northwest</u> Signs 2. The true name(s) and business	address(es) of the entity or individual(s) doing
business under the assumed bu <u>Name</u>	isiness name is/are: <u>Complete Address</u>
Je, FFrey R. Maso	- <u>205 E Selfice Way</u> Post Falls, ID 83854
3. The general type of business tra (mark only those that apply)	ansacted under the assumed business name is:
X Wholesale Trade Ag	anufacturing I Transportation and Public Utilities priculture I Finance, Insurance, and Real Estate onstruction I Mining
4. The name and address to which correspondence should be addr <u>Jeffrey R. Masion</u> <u>203 E Selfice W</u>	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
5. Name and address for this ackn copy is (if other than # 4 above):	Secretary of State700 West JeffersonowledgmentPO Box 83720Boise ID 83720-0080208 334-2301
	Secretary of State use only
Signature: May Mon Printed Name: Jeffrey R. Ma Capacity: Jeffrey R. Mason (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE   IDANO </td
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