



# 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**

SEP 6 11 01 AM '01

SECRETARY OF STATE  
STATE

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

THE BOISE REAL ESTATE STORE

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

BOISE REAL ESTATE STORE, INC. 2960 SELKIRK DR. BOISE, ID 83702

3. The general type of business transacted under the assumed business name is:

- |                                                                         |                                                              |
|-------------------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Retail Trade                                   | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                                | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                                       | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                                  | <input type="checkbox"/> Mining                              |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate |                                                              |

4. The name and address to which future correspondence should be addressed:

2960 SELKIRK DR.  
BOISE, IDAHO 83702

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):

208-283-3283

Secretary of State use only

Signature

*David A. Hunt*

Printed Name:

DAVID A. HUNT

Capacity:

PRESIDENT

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE  
09/06/2001 05:00  
CK: 1247 CT: 150925 BH: 417628  
1 @ 20.00 = 20.00 ASSUM NAME # 5

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