



**CERTIFICATE OF ASSUMED BUSINESS NAME**  
 (Please type or print legibly. See instructions on reverse.)

**FILED/REFFECTIVE**

00 SEP 29 AM 10:29

To the SECRETARY OF STATE, STATE OF IDAHO

SECRETARY OF STATE  
 STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

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

Merlin Technology

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

Deanne Logue

310 N 10th St Spirit Lake Id  
83869

3. The general type of business transacted under the assumed business name is:  
 (mark only those that apply)

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

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208 623-2851

Deanne Logue  
PO Box 745  
Spirit Lake Id 83869

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
 \_\_\_\_\_

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

Secretary of State use only

IDAHO SECRETARY OF STATE

09/29/2000 09:00  
 CK: 6202 CT: 136658 BH: 351603

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 39378

Signature: Deanne Logue

Printed Name: Deanne C Logue

Capacity: owner

(see instruction # 8 on back of form)