

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



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.

JUN 23 AM 8:46

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

South Fork Cabinets

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
<u>Jared Anderson</u>	<u>4239 E 102 N Idaho Falls, ID 83401</u>
<u>Josh Anderson</u>	<u>4205 E Linden Rd Idaho Falls ID 83401</u>

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

<input 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 type="checkbox"/> Services	<input checked="" type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Phone number (optional): _____

4205 E Linden RD
Idaho Falls ID 83401

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:
25.00
Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: _____

Printed Name: Jared Anderson

Capacity: general partner

(see instruction # 8 on back of form)

Secretary of State use only

Delet 72

IDAHO SECRETARY OF STATE
06/23/2003 05:00
CK: 625 CT: 158818 BH: 687325
1 @ 25.00 = 25.00 ASSUM NAME # 2

Revision 2/97

g:\corp\forms\stbn.pms