

(see instruction # 8 on back of form)

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.

	5) . ,
1. The assumed business name which the unde	ersigned use(s) in the transaction of
business is:	· · · · · · · · · · · · · · · · · · ·
Dickson Drafting	Fix
2. The true name(s) and business address(es)	-
business under the assumed business name	:
<u>Name</u>	Complete Address
Tom Dickson	4017 Loxton Lp.
	(courd'Alene, ID 83815
3. The general type of business transacted unde	er the assumed business name is:
Titotan riado	and Public Utilities
Wholesale Trade ☐ Construction✓ Services ☐ Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
To Orde	Basement West PO Box 83720
4017 Loxton Lp.	Boise ID 83720-0080
Coeurd'Alene, ID 83815	208 334-2301
	Phone number (optional):
 Name and address for this acknowledgment copy is (if other than # 4 above). 	•
	(208)667-3537
Bank of America	Secretary of State use only
Coenra Alene ID 83814	Societary of Guile and Only
- Cocura Hitse, In 6 Soil	0.0 p. 6.5 p. 6.
Signature: Mrway (signature required)	let mood
Printed Name: THOMAS W. DICKSON	IDAHO SECRETARY OF STATE IDAHO SECRETARY OF STATE OB/02/2004 05:00 CK: NO CK # CT: 158010 BH: 758535 1 9 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title: OWNIER	\$\begin{align*}
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