

FILED

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on other page.)

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.

98 APR -3 AM 9:23

STATE OF IDAHO

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

Olson-Davis, a general partnership

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>Robert L. Davis</u>	<u>Route 1, Box 40, Nordman, ID 83848</u>
<u>Sharon V. Davis</u>	<u>Route 1, Box 40, Nordman, ID 83848</u>
<u>Tim S. Olson</u>	<u>651 N. Sierra View Way, Eagle, ID 83616</u>
<u>Julie A. Olson</u>	<u>651 N. Sierra View Way, Eagle, ID 83616</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 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) \_\_\_\_\_

Olson-Davis, a general partnership  
Route 1, Box 40  
Nordman, ID 83848

Submit Certificate of  
 Assumed Business  
 Name and \$20.00 fee to

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

FIRST SECURITY BANK N.A.  
 COMMERCIAL LOAN DOCUMENTATION CENTER  
 P.O. BOX 8203  
 BOISE, IDAHO 83707

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

Signature: Robert L. Davis

Printed Name: Robert L. Davis

Signature: Tim S. Olson

Printed Name: Tim S. Olson

Signature: Sharon V. Davis

Printed Name: Sharon V. Davis

Signature: Julie A. Olson

Printed Name: Julie A. Olson

(see instruction # 8 on other sheet)

Secretary of State use only

IDAHO SECRETARY OF STATE

04/03/1998 09:00  
 CK: 796299273 CT: 66269 IN: 97716

1 @ 20.00 = 20.00 ASSUM NAME

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