



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED/EFFECTIVE

Please type or print legibly.

01 AUG -1 PM 2:14

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

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

Ponderosa Gallery/Just Say Cheese

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

<u>Name</u>	<u>Complete Address</u>
<u>Doug + Shannon Weaver</u>	<u>415 Main St.</u>
	<u>Salmon, ID 83467</u>

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

- | | |
|--|--|
| <input checked="" 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 type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Ponderosa Gallery/Just Say Cheese
415 Main St.
Salmon, ID 83467

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) 756-8610

Secretary of State use only

Signature: Shannon Weaver

Printed Name: Shannon Weaver

Capacity: owner

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE
08/01/2001 05:00
CK: 1029 CT: 149575 BH: 411150
1 @ 20.00 = 20.00 ASSUM NAME 2

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