

FILED EFFECTIVE



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.

2003 NOV 10 AM 9:08

STATE OF IDAHO

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

Clem's Store

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

Name
Mildred Synold
Nancy Kargent

Complete Address

1109 Soft Breeze Post Falls Id 83854
1300 Cora Road Peltich Idaho 83855

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:

Mildred Synold
1109 Soft Breeze
Post Falls Idaho 83854

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

Signature:

Mildred Synold
(signature required)

Printed Name:

Mildred Synold

Capacity/Title:

owner

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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

Phone number (optional):

208-274-2447

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
11/10/2003 05:00
CK: 3482037759 CT: 156170 BH: 710895
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 70454