

Printed Name: $DA \sim \omega$.

(see instruction #8 on back of form)

Capacity/Title: <u>owner</u>

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECT VE

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

7003 JAN -2 AM 9: 12

A DE CONTE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

	AND CALIDAHO CAL
 The assumed business name which the under business is: 	ersigned use(s) in the transaction of
AMERICAN RIDGE PROPERT	y management
The true name(s) and business address(es) of business under the assumed business name Name	· · · · · · · · · · · · · · · · · · ·
DAN BAILEY	1580 Hwy 99
Pro Diller	0.00-1
	TROY , IO. 83871
	·
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction	er the assumed business name is:
Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Finance, Insurance, and Real Estate	rumo and \$20.00 to.
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
•	Basement West
DAN BAILEY	PO Box 83720
P.O. BOX 312	Boise ID 83720-0080
TROY, IN 83871	208 334-2301
5. Name and address for this acknowledgmen	Phone number (optional):
COpy is (if other than # 4 above):	(509) 336-4728
	Secretary of State use only
	100 mg
	\$9d vc

IDAHO SECRETARY OF STATE

01/02/2003 05:00

CK: 199 CT: 158010 BH: 654300

1 8 20.00 = 20.00 ASSUM NAME # 2

D.61059

g:\corpiforms\abn forms\abn Reviewt 00/2002