

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.

2005 DEC 12 AM 10:25

SECRETARY OF STATE
STATE OF IDAHO

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

PEND OREILLE MORTGAGE

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

Name

Complete Address

PEND OREILLE INSURANCE SERVICES, INC.

325 S. MARION AVENUE

(C134320)

SANDPOINT, ID 83864

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

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☒ Finance, Insurance, and Real Estate

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

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

PEND OREILLE INSURANCE SERVICES, INC.

325 S. MARION AVENUE

SANDPOINT, ID 83864

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

Phone number (optional):

(208) 263-2169

Signature: _____

(signature required)

Printed Name: _____

PENNY BROWN

Capacity/Title: _____

V.P.

(see instruction # 8 on back of form)

Secretary of State use only

g:\compliance\forms\slbm.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
12/13/2005 05:00
CK: 6886 CT: 146418 BH: 926419
1 @ 25.00 = 25.00 ASSUM NAME # 3

D 94412