



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Please type or print legibly.
Instructions are included on back of application.

2012 AUG 13 AM 9:33

SECRETARY OF STATE
STATE OF IDAHO

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

Salmon Woodcraft

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

Name

William R. Elder

Complete Address

1219 South Challis St., Unit A, Salmon, ID 83467

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
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

William R. Elder

1219 South Challis St., Unit A

Salmon, ID 83467

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

Signature: William R. Elder

Printed Name: William R. Elder

Capacity/Title: Owner

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDaho SECRETARY OF STATE
08/13/2012 05:00
CK: 11272 CT: 87841 DH: 1335556
1 @ 25.00 = 25.00 ASSUM NAME # 2