FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

2011 JAN -5 AM 9: 59

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

	Northwes	t Escrow Services
2.	The true name(s) and <u>business</u> address business under the assumed business n Name Sandpoint Title Insurance, Inc (C72519)	(es) of the entity or individual(s) doing name: Complete Address 120 South Second Avenue Sandpoint, Idaho 83864
3.	The general type of business transacted Retail Trade Transportat Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	sion and Public Utilities Submit Certificate of Assumed Business
. 4 .	The name and address to which future correspondence should be addressed: Sandpoint Title Insurance, Inc 120 South Second Avenue Sandpoint, Idaho 83864	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledge copy is (if other than # 4 above):	ment
Signa	nore love af 2 Dillean	Secretary of State use only
_	ed Name: Thomas E. Williams	
	city/Title: President	
Printe	ed Name:	IDAHO SECRETARY OF STATE 01/05/2011 05:00 CK: 577881 CT: 172099 BH: 1253848 1 @ 25.00 = 25.00 ASSUM MANE #

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