

227



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 filling.

FILED/EFFECTIVE

2003 FEB 13 AM 9:04

SECRETARY OF STATE
STATE OF IDAHO

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

H.A.R.P.P.

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

JERI GRAY

DAVID R. HINKSON

Richard A Bellon

RTL BOX 104-B GRANGEVILLE ID
83530

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

☐ Retail Trade

☐ Wholesale Trade

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

☐ Transportation and Public Utilities

☐ Construction

☐ Agriculture

☐ Mining

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

DAVID HINKSON

RTL BOX 104-B

GRANGEVILLE, ID 83530

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

Submit Certificate of Assumed Business Name and \$20.00 fee to:

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

Phone number (optional):

Signature: David R. Hinkson

(signature required)

Printed Name: DAVID R. HINKSON

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

Idaho Secretary of State
Revised 08/2002

IDAHO SECRETARY OF STATE

02/14/2003 05:00

CR: 4976 CT: 158810 BH: 662859

1 @ 20.00 = 20.00 ASSUM NAME # 2

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