## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly)



1.	The assumed business name which the undersigned use(s) in the transaction of business is:				
	EIK Springs Outfitters				
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:				
	Albert Ronald Bayer	604	Complete 3rd 5+		<u>ess</u>
					97537
3.	The general type of business transacted un (mark only those that apply)  Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction		Transpo	rtation	ss name is: and Public Utilities nce, and Real Est
4.	The name and address to which future correspondence should be addressed:  EIK Springs Outfitters		Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:		
	604 3rd St.				<b>\$20.00</b> fee to:
5.	Rogue River OR 97537  Name and address for this acknowledgment copy is (if other than # 4 above):	ŧt	700 Bas PO Bois	West J ement ' Box 83	720 3720-0080
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	ure: allut Egg	Revision 2/97			RETARY OF STATE
			ยง	/30/	2001 09:00
ted	Name: Albert Bayer ty: President	piforms\abn.pm6	€ 53 CK: 1 1 €		144328 BH: 387952

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