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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bus Please type or print legibly. NOTE: See instructions on reverse before	undersigned U/OCT-9 AM 8:40 siness Name. SECRETARY OF STATE
 The assumed business name which the undersigned use(s) in the transaction of business is: abdon services 	
2. The true name(s) and business address(es) of business under the assumed business name Name	of the entity or individual(s) doing Complete Address PO Box 3107 Hayden, Idaho. 83835
 3. The general type of business transacted und Retail Trade Wholesale Trade Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: <u>Abdon Services </u> <u>PO Box 3107 </u> Haden, Idaho. 83835 5. Name and address for this acknowledgment copy is (if other than # 4 above): 	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Signature: Della V Parks Jr (eignature required) Printed Name: Donald v Parks Jr Capacity/Title: Owner (see instruction # 8 on back of form)	Secretary of State use only IDAHO SECRETARY OF STATE 10/09/2007 05:00 CX: 1056 CT: 150010 BH: 1079310 10 25.00 = 25.00 ASSUM NAME # 2 DIJ575