



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2004 APR -8 AM 9:02

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Rostie & Associates

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

Name

Chris Rostie

Complete Address

11385 W.Riverview Dr.

Post Falls, Idaho

83854

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:

Chris Rostie

11385 W.Riverview Dr.

Post Falls, Idaho, 83854

Submit Certificate of Assumed Business Name and \$25.00 fee to:

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

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

Phone number (optional):

509-217-1700

Secretary of State use only

Signature:

Chris Rostie
(signature required)

Printed Name:

Chris Rostie

Capacity/Title:

Owner

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE
04/08/2004 05:00
CK: 2672 CT: 158010 BH: 738857
1 @ 25.00 = 25.00 ASSUM NAME # 2