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

| To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. |   |              |  |  |
|---|---|--------------|--|--|
| 1. The assumed business name which the undersigned use(s) in the transaction of business is:  |   |              |  |  |
| 2.  | <ol><li>The true name(s) and business address(es) of the entity or individual(s) doing<br/>business under the assumed business name is/are:</li></ol> |              |  |  |
|   | Name  | !            | Complete Address   |  |
|   |   |              | Watsod CDA - 83814   |  |
|   | George Watters  |              | Chatson CDA - 838/4  |  |
| 3.  | The general type of business transacted uniformark only those that apply)   | ender the as | ssumed business name is:   |  |
|   | Retail Trade  Manufacturin  Agriculture  Services  Construction   |              | Transportation and Public Utilities<br>Finance, Insurance, and Real Estate<br>Mining |  |
| 4.  | The name and address to which future correspondence should be addressed:  |              |  |  |
|   | George 6 latters  |              | Submit Certificate of  |  |
|   | see the warres  |              | Assumed Business   |  |
|   | 17888 S. Watson   |              | Name and \$20.00 fee to:   |  |
|   | Cours d'alere ID 9381   | 4            | Secretary of State 700 West Jefferson  |  |
| 5   | Name and address for this acknowledgmen   |              | Basement West  |  |
| ٠,  | COpy is (if other than # 4 above):  | Πŧ           | PO Box 83720   |  |
|   | - the first state is a description  |              | Boise ID 83720-0080  |  |
|   |   |              | 208 334-2301   |  |
|   |   |              | Secretary of State use only  |  |
|   |   | on 2/97      | TROHR SECRETARY OF STATE   |  |

Signature:\_

Printed Name: 60 900

Capacity: 1305

(see instruction # 8 on back of form)

12/26/1999 69:66 CK: 1781 CT: 124248 BH: 274877

1 0 20.00 = 20.00 ASSUM NAME # 2

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