



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO **99 NOV -5 AM 10:26**

Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name **NAME OF IDAHO**

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

Y NOT S.P.

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STATE OF IDAHO

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

| Name | Complete Address |
|----------------------|---|
| <u>John Sieckert</u> | <u>13245 W. ANNABROOK</u> <u>BOISE, ID 83713</u> |
| | |
| | |

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

| | | |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): 938-9864

John Sieckert
PO BOX 140316
BOISE, ID 83714

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

Signature: John W. Sieckert

Printed Name: John W. Sieckert

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 1/98

Form 1000-1000-1000

STATE OF IDAHO
11/09/1999 09:00
CK: 1664 CT: 107797 BH: 264531

1 E 20.00 = 20.00 ASSUM NAME # 2

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