

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

2007 FEB 15 AM 8:07

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

High Mountain Consulting

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

Name

Complete Address

Jay D Shaw

P.O. Box 482, Iona, ID 83427

Jane L Shaw

P.O. Box 482, Iona, ID 83472

3. The general type of business transacted under the assumed business name is:

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

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

4. The name and address to which future correspondence should be addressed:

Jay or Jane Shaw

P.O. Box 482

Iona, ID 83427

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

Phone number (optional):

208-709-5811

Secretary of State use only

Signature: Jane Shaw

(signature required)

Printed Name: Jane Shaw

Capacity/Title: Owner/partner

(see instruction # 6 on back of form)

IDAHO SECRETARY OF STATE

02/15/2007 05:00

CK: 1853710 CT: 172099 BH: 1833455

1 25.00 = 25.00 ASSUM NAME # 2

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