

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. NOTE: See instructions on reverse before filing.



 The assumed business name which the ubusiness is: 	
Smith Camp	PANY APPRAISAL
2. The true name(s) and business address(e business under the assumed business na Name PRATT W. Smith	es) of the entity or individual(s) doing ame: Complete Address 9/8/ Avenue South Payeto, St. 83/6/
3. The general type of business transacted	under the assumed business name is:
Retail Trade Transportati Wholesale Trade Constructio Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business Name and \$26.00 fee to:
4. The name and address to which future correspondence should be addressed: Same As Above	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledge copy is (if other than #4 above): 	ment Phone number (optional): \$\mathcal{D} 08-642-1210\$
	Secretary of State use only
Signature: (signature required) Printed Name: RATT W SMITH	DAHO SECRETARY OF STATE DAHO SECRETARY O

(see instruction # 8 on back of form)

Capacity/Title: OWNER