



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.

2007 FEB -5 AM 10:14

SECRETARY OF STATE
STATE OF IDAHO

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

CREEKSIDE MORTGAGE SERVICE

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

BETTY BELL

1623 N.E. Oak Ave
Lincoln City, OR
97367

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 type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Betty Bell
5907 Yellowstone Trail
Coeur d'Alene, ID 83814

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):

Betty Bell
1623 NE Oak Ave
Lincoln City, OR
97367

Signature: Betty Bell (Signature required)

Printed Name: BETTY BELL

Capacity/Title: Owner

(see instruction # 8 on back of form)

Phone number (optional):

541-264-0178 CELL
503-343-9756 HOME

Secretary of State use only

0107859

IDAHO SECRETARY OF STATE
02/05/2007 05:00
CK: 1017 CT: 150810 BH: 1031111
1 @ 25.00 = 25.00 ASSUM NAME # 2