

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-604, 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.

FILED EFFECTIVE

2003 FEB 24 AM 9:42  
SECRETARY OF STATE  
STATE OF IDAHO

2003 FEB 28 AM 9:00  
SECRETARY OF STATE  
STATE OF IDAHO

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

HEDCO, Inc.

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

Jack S. Hammond, PE, President P.O. Box 1070, Challis, ID 83226

Lanna L. Hammond, Secretary P.O. Box 13, Challis, ID 83226

\*Hammond Engineering & Development Company, Inc.

C117926

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 |  |

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

HEDCO, Inc

P.O. Box 1070

Challis, ID 83226

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

Phone number (optional):

(208) 879-5333

Secretary of State use only

Signature: Jack S. Hammond

Printed Name: Jack S. Hammond

Capacity: President/Owner

(see instruction #8 on back of form)

2 copy/normalize form/submit, p43  
Revised 01/2001

IDAHO SECRETARY OF STATE  
02/28/2003 05:00  
CK: 11473 CT: 75052 BH: 665799  
1 @ 20.00 = 20.00 ASSUM NAME # 2

D 63001