Printed Name: TED

(see instruction # 8 on back of form)

Capacity: V, T

## CERTIFICATE OF ASSUMED BUSINESS N (Please type or print legibly. See Instructions on reverse.) ECRETARY OF STATE. STATE OF IDAHO SECRETARY OF STATE, STATE OF IDARIO Pursuant to Section 53-504, Idaho Code, the undersigned Pursuant to Section of an Assumed Business Name. To the SECRETARY OF STATE, STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: HAYDEN BUSINESS PARK 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 BKL INC. 11315 North Government WAY C106380 The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining Phone number (optional): 288 -762-5111 4. The name and address to which future correspondence should be addressed: N. Government wa Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 12/01/2000 09:00 CK: 2103 CT: 139111 BH: 364001

1 # 20.00 = 20.00 ASSUM MAME # 2

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