



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

02 JAN 30 AM 9:03

SECRETARY OF STATE  
STATE OF IDAHO

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

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

Liberty Northwest Group

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

Liberty Northwest Insurance Corp.

One Liberty Centre

Portland, OR 97232-2038

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

- ☐ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☐ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☒ Finance, Insurance, and Real Estate

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

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

Liberty Northwest Insurance Corp.

PO Box 4400

Portland, OR 97208

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

Phone number (optional):  
\_\_\_\_\_

Signature: Charles E. Lundeen

Printed Name: Charles E. Lundeen

Capacity/Title: Vice President, Corporate Counsel

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 01/2001

IDAHO SECRETARY OF STATE  
02/06/2002 05:00  
CK: 321472 CT: 105813 BH: 444633  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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