

FILED

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

98 FEB 27 AM 10:03
SECRETARY OF STATE
STATE OF IDAHO

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

ALGOMA SERVICE CENTER

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

<u>Name</u>	<u>Address</u>
<u>CLYDE E. SMITH</u>	<u>P.O. BOX 817 SAGLE ID 83860</u>
<u>ILEENE J. SMITH</u>	<u>P.O. BOX 817 SAGLE ID 83860</u>

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

9 SERVICES

See categories on the reverse

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

ALGOMA SERVICE CENTER
P.O. BOX 817 SAGLE ID 83860

Signed

Clyde E. Smith

By

Owner

Capacity

Owner

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

02/27/1998 09:00
CK: 1152 CI: 94918 BH: 86835

1 @ 20.00 = 20.00 ASSUM NAME

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