

Printed Name:

Capacity/Title:_

(see instruction # 8 on back of form)

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.

Lochsa Electric	
The true name(s) and business address(es) business under the assumed business name Name Jason R Keen	of the entity or individual(s) doing e: Complete Address 3607 12th St Lewiston Id 83501
Retail Trade Transportation a Wholesale Trade Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: 3607 12 5 4 8350	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
CODY IS (if other than # 4 above):	Phone number (optional): (208) 4/3-2846 (208) 798-198 7 Secretary of State use only

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