



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

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.

FILED

STATE OF IDAHO
99 OCT 20 AM 9:11

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

Apollo Drain And Rooter Service

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
<u>Tom Bateman</u>	<u>4370 Williamsburg Ln.</u>
	<u>Idaho Falls, Id. 83404</u>

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

(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed Phone number (optional) _____

Tom Bateman
4370 Williamsburg Ln.
Idaho Falls, Id. 83404

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

Secretary of State use only

Signature: Tom Bateman

Printed Name: Tom Bateman

Capacity: Owner

(see instruction # 6 on back of form)

RECEIVED
RECORDED
RECORDED
RECORDED

IDAHO SECRETARY OF STATE

10/28/1999 09:00
CX: 16445 CT: 15952 MI: 239479

10 20.00 = 20.00 ASSUM NAME # 2

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