



# 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.

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  
Tom Bateman

Complete Address  
4370 Williamsburg Ln.

Idaho Falls, Id. 83404

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

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

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)

IDAHO SECRETARY OF STATE

10/20/1999 09:00  
CR: 1645 CT: 1552 DR: 23979

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 30143

FILED

59 OCT 20 AM 9:11  
STATE OF IDAHO