

CERTIFICATE OF ASSUMED BUSINESS NAME

Owner

(see instruction # 8 on back of form)

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINES Pursuant to Section 53-504, Idaho Code,	S NAME SANGE
submits for filing a certificate of Assumed Please type or print legibly. NOTE: See instructions on reverse bef	fore filing.
The assumed business name which the unbusiness is:	ndersigned use(s) in the transaction of
The true name(s) and business address(e business under the assumed business na	me:
Name	Complete Address
Nancy L. Zurcher	2625 N. Croft Lane Eagle Idaho 83616
Wade G. Zurcher	2625 N. Croft Lane Eagle Idaho 83616
The general type of business transacted uses a large and address for this acknowledge. The general type of business transacted uses a large and a large a lar	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
COPy is (if other than # 4 above):	208-939-2378
ature: Name:	Secretary of State use only 99d ugg 5002860 Page 1040 SECRETARY OF STATE
ed Name: Nancy Zurcher	. Programme Lidaho Secretary of State

03/07/2003 05:00 CK: 4622 CT: 158018 BH: 667154 1 0 20.00 = 20.00 ASSUM NAME # 2 03235