

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

FILED



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 MAY 15 AM 9:02

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned enters in the transaction of business is:

NORTH WEST GALLERIES

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>SETH GALLI</u> | <u>PO BOX 341 RIGGINS ID 83549</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 checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services                   | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

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

NORTH WEST GALLERIES  
PO BOX 341 RIGGINS ID  
83549

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Seth James Galli

Printed Name: SETH JAMES GALLI

Capacity: OWNER  
(see instruction # 8 on back of form)

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

IDMD SECRETARY OF STATE

05/15/1998 09:00  
CK: 68881677052 CT: 98764 IN: 110923

1 @ 20.00 = 20.00 ASSUM NAME

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