

FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2005 OCT 24 AM 9:17

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

Timberline Helicopters

- The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Brian Jorgenson

Complete Address

PO Box 30

Laclede ID 83841

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

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

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

Brian Jorgenson

PO Box 30

Laclede ID 83841

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

Phone number (optional): \_\_\_\_\_

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

Signature: Brian Jorgenson

(signature required)

Printed Name: Brian Jorgenson

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:\corporations\1 form\abn1.p65  
Revised 04/2003

Secretary of State use only

IDaho SECRETARY OF STATE  
10/24/2005 05:00  
CK: 1128 CT: 158010 BH: 918361  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D92914