



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2006 FEB -6 PM 1:32

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

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

Norton Knob

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

Name

Complete Address

Neal A Johnson

2696 Grangemont Rd, Orofino, Id 83544

Jeannie Johnson

2696 Grangemont Rd., Orofino, Id 83544

3. 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 |  |

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

Neal A or Jeannie Johnson dba Norton Knob

2696 Grangemont Rd

Orofino, Id 83544

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

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

**AMERICAN WEST BANK**

P O BOX 2258

OROFINO, ID 83544

Signature: Neal A Johnson

(signature required)

Printed Name: Neal A Johnson

Capacity/Title: Owner

(see instruction # 8 on back of form)

Phone number (optional):

208-476-7340

Secretary of State use only

g:\corp\forms\labn forms\labn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
02/06/2006 05:00  
CK: 1429 CT: 158810 BH: 936210  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D96251