

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

FILED EFFECTIVE 2003 JUL -7 AM 9: 46

Please type or print legibly. NOTE: See instructions on reverse before filing.

South Fork Administrative Services	
The true name(s) and business addres business under the assumed business Name Tammie L. Smith	os(es) of the entity or individual(s) doing name: Complete Address 197 Commissary Road, Swan Valley, ID 83449
	ed under the assumed business name is: ation and Public Utilities
Services Agricultur Manufacturing Mining Finance, Insurance, and Real Est	Assumed Business
4. The name and address to which future correspondence should be addressed: South Fork Administrative Services	Secretary of State 700 West Jefferson Basement West PO Box 83720
P.O. Box 149 Swan Valley, ID 83449	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment Phone number (optional): (208) 483-2507
	Secretary of State use only
gnature: Samuel Smith (signature required) Tammie L. Smith	- ggd udgssumoj uggssumoj
Capacity/Title: OWNER (see instruction # 8 on back of form)	— IDAHO SECRETARY OF ST Ø7/08/2003 Ø: CK: 1460 CT: 158010 BH: 1 € 25.00 = 25.00 assum

25.00 = 25.00 ASSUM NAME # 2

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