



CERTIFICATE OF ASSUMED BUSINESS NAME

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

NOV 19 PM 12:16

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:

NAUTILUS CUSTOM

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

<u>Name</u>	<u>Complete Address</u>
<u>Robert D Mowrey JR</u>	<u>16764 Northside Blvd</u> <u>Nampa ID, 83687</u>
<u>Craig Hepworth</u>	<u>10003 Rean Meadows DR Boise</u> <u>ID 83709</u>

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 | |

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

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

Robert Mowrey JR
16764 Northside Blvd
Nampa, ID 83687

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

Phone number (optional):

Signature: [Handwritten Signature]

(signature required)

Printed Name: ROBERT D MOWREY JR

Capacity/Title: CO-OWNER/partner

(see instruction # 8 on back of form)

Secretary of State use only

D 82064

IDAHO SECRETARY OF STATE
11/19/2004 05:00
CK: CASH CT: 150010 BH: 777600
1 @ 25.00 = 25.00 ASSUM NAME # 2