| 227   |  |
|---|--|
| CERTIFICATE OF ASSUMED BUSINESS NAME<br>(Please type or print legibly. See instructions on reverse.)  |  |
| To the SECRETARY OF STATE, STATE OF IDAHO<br>Pursuant to Section 53-504, Idaho Code, the undersigned<br>gives notice of adoption of an Assumed Business Name.   |  |
| <ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> <li><u>Tipi</u> KennelS</li> </ol>  |  |
| 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:  |  |
| James T Evans 70 1 Wolf locige  | mplete Address   |
| Paula L. Évans 70 N. Walf La  | Age Creek Rd.  |
| <ol> <li>The general type of business transacted under the assumed business name is:<br/>(mark only those that apply)</li> </ol>  |  |
| Retail Trade       Manufacturing       Transportation and Public Utilities         Wholesale Trade       Agriculture       Finance, Insurance, and Real Estate         Services       Construction       Mining |  |
| 4. The name and address to which future correspondence should be addressed:   |  |
| 70 N. Wolflodge Creek Rd. Cover d'Alene<br>James - T. or Pavia Evans  | Submit Certificate of<br>Assumed Business<br>Name and <b>\$20.00</b> fee to:                     |
| 5. Name and address for this acknowledgment<br>copy is (if other than # 4 above):<br>Tipi Kenne IS  | Secretary of State<br>700 West Jefferson<br>Basement West<br>PO Box 83720<br>Boise ID 83720-0080 |
| 70 N.Wolf lordge Creek Rd   | 208 334-2301<br>Secretary of State use only<br>IDAHU SECRETARY OF STATE                          |
| Coverd'Akne, I da ho<br>83814   | 07/01/1997 09:00   |
| Signature: Paula Lyng Evans   | LK: 1010 CT: 83630 BH: 16949<br>1 0 20.00 = 20.00 ASSUN NAME                                     |
| Printed Name: Paula L E Jans<br>Capacity: OWNEY<br>(See instruction # 8 off back of form)   | D 6196   |

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