



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO  
Pursuant to Section 53-504, Idaho Code, I, Michael P. Orth  
gives notice of adoption of an Assumed Business Name

FILED - 2 AM 8:57  
SECRETARY OF STATE  
STATE OF IDAHO

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

DM + M Mad Mikes Loans

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

<u>Name</u>	<u>Complete Address</u>
<u>Mad Mikes Trading Post LLC</u> <u>(W9202)</u>	<u>1238 N Main Pocatello ID 83204</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

4. The name and address to which future correspondence should be addressed: Phone number (optional): \_\_\_\_\_

Mike Orth  
1242 N Main St.  
Pocatello ID 83204

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: [Signature]  
Printed Name: Michael P Orth  
Capacity: MANAGER  
(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and \$20.00 fee to:  
  
Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only  
IDaho SECRETARY OF STATE  
05/02/2001 09:00  
CK: 1638 CT: 123736 BN: 394655  
1 @ 20.00 = 20.00 ASSUM NAME # 2  
044987

Revision 12/99  
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