



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

To the SECRETARY OF STATE, STATE OF IDAHO

JUL 10 10 10 AM '00

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

Arrowood Insurance Group

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

Name	Complete Address
<u>MARTIN CRAIG ARROWOOD</u>	<u>2957 N. DOUGLASS</u>
	<u>MERIDIAN ID. 836412</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):

Arrowood Insurance Group  
2957 N. DOUGLASS  
MERIDIAN ID. 836412

208-887-7665

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

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

Signature: M. Craig Arrowood

Printed Name: M. Craig Arrowood

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 12/99

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Secretary of State use only

IDAHO SECRETARY OF STATE

07/10/2000 09:00  
CK: CASH CT: 129548 BH: 332259

1 @ 20.00 = 20.00 ASSUM NAME # 2

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