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CERTIFICATE OF ASSUMED BUSINESS DATE (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO	
Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. Mar. 25 ft///1:20	
1. The assumed business name which the undersigned use(s) in the transaction of 1.20 business is: <u>STATE OF IDAHO</u> <u>STATE OF IDAHO</u>	
<ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li> </ol>	
Sherele D TURMAN 130 Elm	Δυc
<u>Sheryle D Turman</u> <u>130 Elm</u> David Turman Kalis	pell, MT 59901
<ol> <li>The general type of business transacted under the assumed business name is: (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 Phone number (optional): <u>406-752-8402</u> correspondence should be addressed:	
sheryle Turman	Submit Certificate of Assumed Business
Box 211	Name and <b>\$20.00</b> fee to:
Cataldo, Id B3810-0211	Secretary of State 700 West Jefferson
5. Name and address for this acknowledgment	Basement West
COPY <b>IS</b> (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080
Sheryle TurmAN	208 334-2301
130 Elm Aue	Secretary of State use only
Kalispell MT 59901	
Signature:	IDAHO SECRETARY OF STATE
	03/28/2001 09:00 CK: 587 CT: 144257 BH: 387611
Printed Name:     D.K. TormAN     8       Capacity:     (D-CWNEK)     100       (see instruction # 8 on back of form)     100	1 @ 20.00 = 20.00 ASSUN NAME # 2
(see instruction # 8 on back of form)	
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