

227

FILED EFFECTIVE
2003 JUL -2 AM 9:00
STATE OF IDAHO

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

Storms Fabrication & Repair

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

Name

Complete Address

Nathan Robert Storms

1011 ALBENT HWY. PO Box 849

Ginny Jean Storms

Priest River, ID. 83856

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 | |

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

Nathan Storms

PO Box 849

Priest River ID 83856

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

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

Phone number (optional):

Secretary of State use only

Signature: Nathan R. Storms

(signature required)

Printed Name: Nathan R. Storms

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 09/2002

IDAHO SECRETARY OF STATE
07/02/2003 05:00
CK: 3874 CT: 158010 BH: 689126
1 @ 25.00 = 25.00 ASSUM NAME # 2

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