



CERTIFICATE OF ASSUMED BUSINESS NAME

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

RECEIVED
2002 MAY -3 AM 9:06
SECRETARY OF STATE
STATE OF IDAHO

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.

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

MAGICO A.C. & C.

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>Nancy L. HENRY</u>	<u>PO Box 967, Priest River, ID 83856</u>
<u>(Physical Address:)</u>	<u>1201 Albany Rd. (Hwy 2)</u>
<u>PETER A. HENRY (spouse)</u>	<u>PRIEST RIVER, ID 83856</u>
<u>(same addresses)</u>	

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

- | | | |
|-----------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> Retail Trade | <input checked="" type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input 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): _____
(not sure yet)

Nancy L. Henry
PO Box 967
PRIEST RIVER, ID 83856

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: _____

Printed Name: NANCY L. HENRY

Capacity: Sole Proprietor (Production & Sales)

(see instruction # 8 on back of form)

Revision: 12/99

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Secretary of State use only

IDAHO SECRETARY OF STATE
05/03/2002 05:00
CK: 5105 CT: 150010 BH: 463460
1 @ 20.00 = 20.00 ASSUM NAME # 2

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