

CERTIFICATE OF ASSUMED BUSINESS NAME

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



To the SECRETARY OF STATE, STATE OF IDAHO 97 OCT 27 AM 8:58
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name STATE OF IDAHO

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

North Fork Framing

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>Griffin H. Walker</u>	<u>P.O. Box 1256 Orofino, Id 83544</u>
<u>Ramona L. Walker</u>	<u>P.O. Box 831 Orofino, Id. 83544</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 type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input 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): (208) 476-3418

Ramona Walker
P.O. Box 831
Orofino, Id. 83544

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

Signature:

Ramona Walker

Printed Name:

Ramona Walker

Capacity:

partner

(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
IDMD SECRETARY OF STATE

10/27/1997 09:00
CK: 559 CT: 86994 BH: 58236

10 20.00 = 20.00 ASSUM NAME

09208

Revision 2/87

5/10/1997 10:00 AM