



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2006 OCT 10 AM 9:55

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

DISHPAN HANDS BOWLING LEAGUE

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
<u>JOYCE ANDERSON</u>	<u>P.O. Box 278, KAMIAH, ID 83536</u>
<u>PENNY TILLERY</u>	<u>P.O. Box 562, KOOSKIA, ID 83539</u>
<u>ROSE ROBERTS</u>	<u>Rt. 2 Box 856, KAMIAH, ID 83536</u>

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:

ROSE ROBERTS  
Rt. 2 Box 856  
KAMIAH, ID 83536

Submit Certificate of  
Assumed Business  
Name and \$25.00 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):

935-0114

Secretary of State use only

Signature: Joyce Anderson  
(signature required)

Printed Name: JOYCE ANDERSON

Capacity/Title: PRESIDENT

(see instruction # 8 on back of form)

g:\compforms\idn form\slabn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
10/10/2006 05:00  
CK: 1049 CT: 205233 BH: 979167  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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