



# 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.**

**FILED/EFFECTIVE**  
01 APR 26 AM 8:59  
SECRETARY OF STATE  
STATE OF IDAHO

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

Pend Oreille Mortgage

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

<u>Name</u>	<u>Complete Address</u>
<u>Pend Oreille Insurance Services, Inc.</u>	<u>318 Pine Street</u>
<u>C 134320</u>	<u>P.O. Box 1087</u>
	<u>Sandpoint ID 83864</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 type="checkbox"/> Services                                       | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                                  | <input type="checkbox"/> Mining                              |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

Pend Oreille Insurance Services, Inc.  
318 Pine Street  
Sandpoint ID 83864

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):

(208) 263-2149

Secretary of State use only

IDAHO SECRETARY OF STATE

04/26/2001 09:00  
CK: 1547 CT: 145506 BH: 393555

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 44822

Signature: David W. Brown

Printed Name: David W. Brown

Capacity: President

(see instruction # 8 on back of form)