

## 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.



| ALL AMERICAN SERVICES  |  |
|--|--|
| The true name(s) and business address(es) of true business under the assumed business name:  | , , ,  |
| Name<br>BROOKS E SWANSON   | Complete Address PO BOX 891 PRIEST RIVER, ID. 83856  |
| The general type of business transacted under the  |  |
| Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:  BROOKS E SWANSON PO BOX 891 PRIEST RIVER, ID. | 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  Phone number (optional): |

g:tcorp/forms/abn forms/abn.p55 Revised 04/2003

Signature: (signature required)

Printed Name: BROOKS E SWANSON

Capacity/Title: OWNER SOLE PROPRIETER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

23/27/2006 05:00

CK: 760374 CT: 172099 BH: 945535
1 0 25.00 = 25.00 ASSUM NAME # 2

097993