

## **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.

2012 JAN 25 AM 8: 52

SECRETARY OF STATE

Instructions are included on back of applica	ation. STATE OF IDAHO
The assumed business name which the under business is:	]]
Inhaud Nortwest Craw	Levs
	f the entity or individual(s) doing  Complete Address  Shebang Cr. Rd. Diagroine Idaho 8353  69 E Ma. n Praignal Idaho 83523- 5104
a. The second standard and	r the assumed business name is:
3. The general type of business transacted unde	
	ld Public Guilles
TO THE TAXABLE PARTY OF THE PAR	
	Submit Certificate of
	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
Don De Armond	PO Box 83720 Boise ID 83720-0080
72 Shebang Cr. Rd.	208 334-2301
Brangeville, Idaho 83530	
5. Name and address for this acknowledgment	
COPY IS (if other than # 4 above):	
	Secretary of State use only
Signature: On Wolfman	
Printed Name: Don DeArmond	
Capacity/Title: + reasorer	· · · · · · · · · · · · · · · · · · ·
Signature: 16 Dellman	
Printed Name:	IDAHO SECRETARY OF STATE 01/25/2012 05:00
Capacity/Title:	CK: 19883965 CT: 7915 BH: 1387737

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