

227

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.

2003 NOV 20 AM 8:57

CLERK OF STATE
STATE OF IDAHO

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

ERGONOMIC OFFICE SOLUTIONS

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

Sheral Rohrenbach

*P.O. Box 632
Rathdrum, Id
83858*

3. The general type of business transacted under the assumed business name is:

Retail Trade

Transportation and Public Utilities

Wholesale Trade

Construction

Services

Agriculture

Manufacturing

Mining

Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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

*Ergonomic Office Designs
Sheral Rohrenbach
P.O. Box 632
Rathdrum, Id. 83858*

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):

208-687-2870

Secretary of State use only

Signature: *Sheral Rohrenbach*

(signature required)

Printed Name: *Sheral Rohrenbach*

Capacity/Title: *owner*

(see instruction # 8 on back of form)

070809

IDaho SECRETARY OF STATE
11/20/2003 05:00
CK: 1516 CT: 150010 BH: 712664
1 @ 25.00 = 25.00 ASSUM NAME # 2