



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

01 JUL 30 4:10:29

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

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

Low Cost Legal

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

Name

KAREN KINGTON
GEORGIANNA WILLIAMS

Complete Address

P.O. Box 185, HEYBURN, ID 83336
0185

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:

KAREN KINGTON
P.O. BOX 185
HEYBURN, ID 83336-0185

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):

208-878-8101

Secretary of State use only

Signature: Karen Kington

Printed Name: KAREN KINGTON

Capacity: OWNER

(see instruction # 8 on back of form)

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Revised 01/2001

IDANO SECRETARY OF STATE
07/30/2001 05:00
CK: 2107 CT: 149427 BH: 418407
1 @ 20.00 = 20.00 ASSUM NAME # 2

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