

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SEP 10
SECRETARY OF STATE
STATE OF IDAHO

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

De Ment Enterprises

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

<u>Name</u>	<u>Complete Address</u>
<u>Jeffery A. DeMent</u>	<u>#188</u>
	<u>1602 E. Seltice Way, Ste A.</u>
	<u>Post Falls, ID 83801</u>

3. The general type of business transacted under the assumed business name is:
mark only those that apply:

☒ Retail Trade	☐ Manufacturing	☐ Transportation and Public Utilities
☒ Wholesale Trade	☐ Agriculture	☐ Finance, Insurance, and Real Estate
☐ Services	☐ Construction	☐ Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-255-1034

De Ment Enterprises
#188
1602 E. Seltice Way, Ste A.
Post Falls, ID 83801

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Jeffery A. DeMent
1637 Kelso Lake Rd
Arhol, ID 83801

Signature: Jeffery A. DeMent
Printed Name: Jeffery A. DeMent
Capacity: Sole Proprietor

(see instruction # 8 on back of form)

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

Secretary of State use only

IDAHO SECRETARY OF STATE
09/10/2001 05:00
CK: 1961 CT: 151009 BH: 410248
1 @ 20.00 = 20.00 ASSUM NAME # 2

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