



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 JUN 29

FILE

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:

SUGAR MOUNTAIN WOODWORKS

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

Name

DAVID B. ANDERSON

Complete Address

476 SOUTH 50TH WEST #1

VICTOR, ID 83455

(NOTE: PHYSICAL ADDRESS ONLY)

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 checked="" type="checkbox"/> Construction |
| <input 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:

DAVID B ANDERSON

PO BOX 427

DRIGGS, ID 83422

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

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

BUZZ JOHNSON

PO BOX 1248

CANNON BEACH, OR 97110

Phone number (optional):

503-436-1728

Secretary of State use only

Signature: *David B. Anderson*

(signature required)

Printed Name: DAVID B ANDERSON

Capacity/Title: OWNER / SOLE PROPRIETOR

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
06/29/2005 05:00
CK: 570 CT: 190069 BH: 818626
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 89238