Printed Name: Kou,~

) irector

(see instruction # 8 on back of form)

Capacity:

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

(Flease type or print legibly	/. See instructions on reverse.)
To the SECRETARY OF STATE, S Pursuant to Section 53-504, I gives notice of adoption of an	TATE OF IDAHO Idaho Code, the undersigned 22 AM 0.
The assumed business name which the business is:	undersigned use(s) in the transaction of
Ketchum Wood	Werks
The true name(s) and business address(business under the assumed business named	(es) of the entity or individual(s) doing
<u>Name</u>	Complete Address
Kouin D Dugan	PO Box 523 Ketchun ID
3. The general type of business transacted under the assumed business name is:	
☐ Retail Trade ☐ Manufacturin☐ Wholesale Trade ☐ Agriculture☐ Services ☐ Construction☐	Finance Insurance and Book For
4. The name and address to which future correspondence should be addressed: Kevin Direct	Phone number (optional): 208-726-3394
PO Box 523	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Kctchun ID 83346 5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State
	Secretary of State use only 1000 SECRETARY OF STATE
nature:	IDAHO SECRETARY OF STATE 11/22/2000 09:00 CK: 2418 CT: 13439 No. 20545

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