Т	(Please type or print legibly. See instruothe SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Coogives notice of adoption of an Assumed	IDAHO de, the undersigned d Business Name	
1.	The assumed business name which the undersigned use(s) in the fransaction of business is:		
	B	NGO WEST	
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> Dennis Jeff Hodges	Complete Address 848 Bracken St N Twin Falls, ID 83301	
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
4.		g	
	correspondence should be addressed: Dennis Jeff Hodges		
	848 Bracken St N	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
	Twin Falls, ID 83301 Name and address for this acknowledgment copy is (if other than #4 above).	Secretary of State 700 West Jefferson	
	D L EVANS BANK Attn: Laura Gines	Boise ID 83720-0080 208 334-2301	
	PO Box 87 Twin Falls, ID 83303-0087	Secretary of State use only	
Signatu	re San Jellera	IDANO SECRETARY OF STATE 92/84/1999 69:00 CL: 964367 CT: 1935 DH: 184925	
Printed Name: <u>Dennis J Hodges</u>		9 1 9 20.00 = 20.00 ASSUM NAME # 2	
Capacit	y: Owner : (see instruction # 8 on back of form)	1 8 20.00 = 20.00 ASSUM NAME 1 2	