

FILED

CERTIFICATE OF ASSUMED BUSINESS NAME

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



To the SECRETARY OF STATE, STATE OF IDAHO, 98 MAR 12 AM 10:08
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name of STATE OF IDAHO

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

Claude's Leather Shop

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

Name	Complete Address
<u>Claude B. Newell</u>	<u>7910 Sweet-OLA Hwy - PO Box 14 Sweet, Id 83670</u>
<u>Lew Gene H. Newell</u>	<u>7910 Sweet-OLA Hwy - PO Box 14 Sweet, Id 83670</u>

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

<input checked="" type="checkbox"/> Retail Trade	<input checked="" type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed:

Phone number (optional): (208) 584-3457

Claude's Leather Shop
7910 Sweet-OLA Hwy
PO Box 14 Sweet, Id 83670

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

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

03/12/1998 09:00
CX: 501 CT: 95599 DN: 98132

10 20.00 = 20.00 ASSUM NAME

012971

Signature: Claude B. Newell

Printed Name: Claude B. Newell

Capacity: Owner - operator

(see instruction # 8 on back of form)