



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 NOV -1 PM 9:20

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:

Kinetico Contracts

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

Name

Lynn Pettingill

Complete Address

1635 Brierwood Lane

Elaine Pettingill

Twin Falls Id. 83301

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

Lynn or Elaine Pettingill  
1635 Brierwood Lane  
Twin Falls, Id 83301

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):

**DL EVANS BANK**  
222 MAIN AVE. S.  
TWIN FALLS, ID 83301  
124103582

Phone number (optional): \_\_\_\_\_

Secretary of State use only

Signature: Lynn Pettingill

(signature required)

Printed Name: Lynn Pettingill

Capacity/Title: \_\_\_\_\_

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE  
**11/08/2005 05:00**  
 CK: 9062294 CT: 158010 RH: 921055  
 1 0 25.00 = 25.00 ASSUM NAME # 2

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