

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

FILED



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SEP 15 AM 10:45
SECRETARY OF STATE
STATE OF IDAHO

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

A & B Wholesale

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>Amy Erickson</u>	<u>1011 Deon Dr # 10 Pocatello, ID 83201</u>
<u>Brian Erickson</u>	<u>1011 Deon Dr # 10 Pocatello, ID 83201</u>

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

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

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

1011 Deon Dr. # 10
Pocatello, ID 83201

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

09/15/1999 09:00
CK: 1593 CT: 120537 BH: 249966

1 @ 20.00 = 20.00 ASSUM NAME # 2

D29212

Signature: Amy Erickson

Printed Name: Amy Erickson

Capacity: Owner

(see instruction # 8 on back of form)

Revision 2/87
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