| 227 | |
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| CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) | |
| To the SECRETARY OF STATE, STATE OF IDAHUD 26 12 11 PH '97 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. STATE | |
| The assumed business name which the undersigned use(s) in the transaction of business is: | |
| IDAHO INTERNATI | ONAL FUNDING |
| The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | |
| MIKEL, J. SNELLING | <u>Complete Address</u> 71 S. W. JTH ST. MERIDIAN |
| | IDAHO. 83642 |
| | |
| The general type of business transacted under the assumed business name is: (mark only those that apply) | |
| Retail Trade Manufacturi Wholesale Trade Agriculture Services Construction | Finance, Insurance, and Real Estate |
| 4. The name and address to which future Phone number (optional): 208 - 89.5 - 02.09 correspondence should be addressed: | |
| 71 S.W. JTH ST. MERIDIA , IDAHO, 83642 | Submit Certificate of Assumed Business Name and \$20.00 fee to: |
| 5. Name and address for this acknowledgme copy is (if other than #4 above): | ent Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| | Secretary of State use only |
| Signature: <u>mikel Snelley</u> Printed Name: <u>MIKEL</u> , SNELLING | IDAHO SECRETARY OF STATE DATE 06/26/1997 0900 105975 3 CK #: 254 CUST# 83547 ASSUM NAME 10 20.00= 20.00 |
| Capacity: <u>C.E.O.</u> (see instruction # 8 on back of form) | ASSUM NAME 10 20.00= 20.00 # : D 5851 |

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