

CERTIFICATE OF ASSUMED BUSINESS NAME

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



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.

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

Cycles, Sleds & Saws

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>Bill Thomas Burke</u>	<u>315 Courthouse Dr Salmon ID 83467</u>
<u>Patricia B. Burke</u>	<u>315 Courthouse Dr. Salmon ID 83467</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 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:

Bill & Patti Burke
315 Courthouse Dr.
Salmon, ID 83467

Phone number (optional):

208-756-3797 Home
208-756-2325 Work

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
DATE 06/16/1997

0900 102426 2
CK #: 4108 CUST# 82163
ASSUM NAME 10 20.00= 20.00

#1 D 5487

Signature:

Patti Burke

Printed Name:

Patricia Burke

Capacity:

owner

(see instruction # 8 on back of form)

Revision 2/97

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