

Capacity/Title:

(see instruction # 8 on back of form)

## CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

TO STATE OF THE

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Complete Address 10977 Highway 78 Melba, ID 83641  sumed business name is: C Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
Submit Certificate of Assumed Business
Secretary of State 700 West Jefferson
Basement West PO Box 83720 Boise ID 83720-0080
208 334-2301
Phone number (optional): 208-896-5774
Secretary of State use only

IDAHO SECRETARY OF STATE

12/30/2004 05:00

CK: 3026 CT: 158010 BH: 784318
1 0 25.00 = 25.00 ASSUM NAME # 2

1)82985