

FILE

# 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.

SECRETARY OF STATE  
STATE OF IDAHO



98 MAY 15

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

SANDY'S FLAGGING SERVICE

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>SANDRA K. HALVORSEN</u>	<u>3692 HARBORPOINT DR</u>
	<u>MERIDIAN ID</u>
	<u>83642</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 checked="" 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 checked="" type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Phone number (optional): (208) 884-4126

SANDRA K. HALVORSEN  
3692 HARBORPOINT DR  
MERIDIAN ID 83642

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature:

Sandra K. Halvorsen

Printed Name:

SANDRA K. HALVORSEN

Capacity:

Sandra K. Halvorsen

(see instruction # 8 on back of form)

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

05/18/1998 09:00  
CR: none CT: 90501 BR: 111750

1 @ 20.00 = 20.00 ASSUM NAME

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Revision 2/87

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