



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 STATE OF IDAHO
 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:

Lakeshore Appraisals

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>Donald F. Anderson</u>	<u>118 N. 7th St. B-11</u>
	<u>Coeur D'Alene ID 83814</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 type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input checked="" 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 Phone number (optional) _____

Same

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
 208 333-0000 SECRETARY OF STATE

01/18/2000 09:00
 Section 278 502e 085300, BH: 281969

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Don Anderson

Printed Name: Don Anderson

Capacity: Owner

(see instruction # 6 on back of form)

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