

FILED EFFECTIVE
2003 MAY 30 AM 8:54



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

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

TREATY ROCK UNIVERSITY

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

J.D. DICKINSON

Complete Address

P.O. Box 1268

POST FALLS, ID, 83877

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

~~PO Box~~ P.O. Box 1268
POST FALLS, ID 83877

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Same

Phone number (optional):

208-699-0702

Secretary of State use only

Signature: _____

(signature required)

Printed Name: J.D. Dickinson

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 04/2003

IDAH0 SECRETARY OF STATE
05/30/2003 05:00
CK: 6992 CT: 150010 BH: 683411
1 @ 25.00 = 25.00 ASSUM NAME # 2

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