

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned JAN -3 AN 9: 47 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

_	BERGEN PROPERT	Y MANA	GEMENT
	ne true name(s) and business address(es)		entity or individual(s) doing
bu	siness under the assumed business name	:	<u> </u>
	Name	Complete Address	
_	SUSAN D BERGEN	225 LUN	IG ISLAND AVE. TWIN FALLS, ID 83301
Th	Retail Trade Transportation		
	Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:
	ne name and address to which future rrespondence should be addressed:		Secretary of State 700 West Jefferson Basement West
_	SUSAN D BERGEN		PO Box 83720
2	225 LONG ISLAND AVE.		Boise ID 83720-0080 208 334-2301
T	TWIN FALLS ID 83301		200 334-2301
	lame and address for this acknowledgmen opy is (if other than # 4 above):	t	Phone number (optional):
			Secretary of State use only
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