

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

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

2005 NOV 10 AM 9:08

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the unduliness is:	
2. The true name(s) and <u>business</u> address(est business under the assumed business name Name  FOREST G. VAN DORN  3. The general type of business transacted under the sum of th	of the entity or individual(s) doing ne:  Complete Address  140 2 MICE ROAD  P.O. Box 444  OSBURN ID 83849
	Submit Certificate of Assumed Business Name and \$25,00 fee to:
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Phone number (optional):  752-1790  208-752-1294
	Secretary of State use only
Printed Name: FOREST VAN DORN Capacity/Title: SALE PROPRIETOR (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  11/10/2005 05:00  CK: 6554 CT: 158010 BH: 921628  1 0 25.00 = 25.00 ASSUM NAME # 2