

(see instruction # 8 on back of form)

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.

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

 The assumed business name which the und business is: 	lersigne	d use(s) in the transaction of		
RMK Repower	<u></u>			
The true name(s) and business address(es) business under the assumed business name		entity or individual(s) doing		
Name		Complete Address		
Robert Kelly Melanie Keely	368 368	Fafrix Dr Kimbel	1-ld 83341 ly-ld 83341	
3. The general type of business transacted und				
5. The general type of business transacted und	uer ine i	assumed business name is.		
Retail Trade Transportation Wholesale Trade Construction	and Pu	blic Utilities		
Services		Submit Certificate of Assumed Business Name and \$25.00 fee to:		
4. The name and address to which future correspondence should be addressed: RMK Resources		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080		
		208 334-2301		
5. Name and address for this acknowledgmer copy is (if other than #4 above):	nt	Phone number (optional):		
348 Fafnix DK		Secretary of State use only		
Kimbery Sice 1951		·		
Signature: A Care (signature required)	Corpyforms\abn forms\abn.p65 Revised 04/2003	OII387		
Printed Name: Melasie Kelly	forms\abn form Revised 04/2003	IDAHO SECRETARY OF		
Capacity/Title:	konpliform Revi	CK: 2737 CT: 213318 BH	5	