FILED EFFECTIVE



Printed Name:

Capacity/Title:

PRESIDE

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 NOW NOV AM 9AM 9:

STATE STATE, OF IDE HO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

KENCY CREDIT SER	VICE, INC.
The true name(s) and business address(es) of t	the entity or individual(s) doing
business under the assumed business name:	_
Name	Complete Address
CREDIT SERVICES OF OREGON, IN	le.
P.O. Bay 1208	
ROSEBURG, OR 97470	
C/57/38 The general type of business transacted under t	the period business .
The general type of business transacted under	ne assumed business name is:
Retail Trade Transportation and	Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West
MARY INSCORE, FRES.	PO Box 83720 Boise ID 83720-0080
CSO FINANCIAZ	208 334-2301
P.O. BOX 1208 ROSEBURE,	
Name and address for this acknowledgment	Phone number (optional):
CODY IS (if other than # 4 above):	541-673-6661
	<u>σιι σησ φφ</u> φη
	Secretary of State use only

forms\abn forms\ Revised 04/2003

IDANO SECRETARY OF STATE
11/12/2004 05:00
CK: 145889 CT: 183658 BH: 776244
1 0 25.00 = 25.00 ASSUM NAME # 2

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