



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2004 MAY 27 AM 9:05

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:

HEIER-DREYER PROPERTIES

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

Name

Complete Address

ROBERT P. DREYER P.O. #4917 KETCHUM ID. 83340
KENNETH & NANCY DREYER P.O. #4953 KETCHUM ID. 83340
DAVID HEIER 4021 NORTHPOINT DR. ANCH, AK. 99502

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

- | | |
|---|--|
| <input 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 checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

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

BOB DREYER/HEIER-DREYER
P.O. #4917
KETCHUM, ID. 83340

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

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

Phone number (optional):

208-726-2874

Secretary of State use only

Signature: _____

(signature required)

Printed Name: _____

Capacity Title: _____

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
 05/27/2004 05:00
 CK: 28741 CT: 179590 BH: 747433
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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