

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

09 DEC -9 PM 2: 20

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the understand business is: H///////////////////////////////////	
2. The true name(s) and business address(es) of business under the assumed business name: Name Donal S KNAPP 5	Complete Address 31 Hwy 52 Horstskot Bend IN 83629 Wiling Po Box 252 HSB I
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: Don KNAPP	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	
Signature: Printed Name: Down Compacity/Title: Dwwck	Secretary of State use only 13545