

# CERTIFICATE OF ASSUMED BUSINESS NAME EFFECTIVE

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

00 APR 11 AM 9:30



Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name

1. The assumed business name which the undersigned use(s) in the transaction of business is:

C. LINK

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

Name MIKE Goggin Complete Address 433 Madison Rd. Post Falls  
ID 83854

3. The general type of business transacted under the assumed business name is:  
 (mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

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

C. LINK MIKE Goggin  
433 MADISON Rd.  
Post Falls, ID 83854

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

C. LINK  
MIKE Goggin  
433 MADISON Rd  
Post Falls, ID 83854

Signature: Mike Goggin

Printed Name: MIKE Goggin

Capacity: President

(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State  
 700 West Jefferson  
 Basement West  
 PO Box 83720  
 Boise ID 83720-0080  
 208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

04/11/2000 09:00  
 CK: 1076 CT: 07292 BH: 307736

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