

## CERTIFICATE OF ASSUMED BUSINESS NAME

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.

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The assumed business name which the under	ersigned use(s) in the transaction of
business is:  HARMAN AGENCY	
The true name(s) and <u>business</u> address(es) of business under the assumed business name: <u>Name</u> GORDON R. HARMAN	of the entity or individual(s) doing  Complete Address  423 MAIN ST, COTTONWOOD, IDAHO 8352
3. The general type of business transacted und	er the assumed business name is:
Retail Trade Construction  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  GORDON HARMAN HARMAN AGENCY  P.O. BOX 575  COTTONWOOD, IDAHO \$3522  5. Name and address for this acknowledgment copy is (if other than #4 above).	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  Phone number (optional):  208-962-3221
ignature:	Secretary of State use only  Secretary of State use only  IDAHO SECRETARY OF STATE  10/15/2001 05:00  CK: 9870 CT: 152444 BH: 424383  1 0 20.00 = 20.00 ASSUM MANE # 2
Capacity: OWNER (see instruction # 8 on back of form)	D 49079