

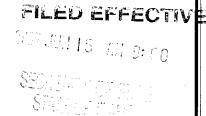
## CERTIFICATE OF ASSUMED BUSINESS NAME

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.

(see instruction # 8 on back of form)



| Complete Address 11365 N Government Way  Hayden, ID 83835  r the assumed business name is:  nd Public Utilities  Submit Certificate of   |
|--|
| nd Public Utilities  |
| Submit Certificate of  |
| Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West   |
| PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301  |
| Phone number (optional):  208-772-0641   |
| Secretary of State use only  |
| 10AHO SECRETARY OF STAT  10AHO SECRETARY OF ST |
|  |