

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO 97 OCT 22 AM 10: 23

Pursuant to Section 53-504, Idaho Code, the undersigned _____ OF STATE
gives notice of adoption of an Assumed Business Name OF IDAHO

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

THE LOG GUY

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

Complete Address

CARL MORSE

P.O. Box 605

New Meadows, Idaho 83654

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

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☐

Services

☒

Construction

☐

Mining

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

Phone number (optional): _____

C.J. MORSE

P.O. Box 605

New Meadows, IDA 83654

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

Secretary of State use only
IDAHO SECRETARY OF STATE

10/22/1997 09:00
CK: 67699036462 CT: 86079 BH: 49121

1 @ 20.00 = 20.00 ASSUM NAME

D 9140

Signature: _____

Printed Name: _____

Capacity: _____

(see instruction # 8 on back of form)

Revision 2/97

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