

FILED/EF
NOV 15 01 9:00
CLERK



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.

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

Property Damage Appraisers of Pocatello

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

Name	Complete Address
Thomas Strickland	P.O. Box 5388 Pocatello, Idaho 83202

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

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

Thomas Strickland
P.O. Box 1400
Blackfoot, Idaho 83221

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

Phone number (optional):
208-237-6200

Secretary of State use only

Signature: [Signature]
(signature required)

Printed Name: Thomas Strickland

Capacity/Title: Owner/Operator

(see instruction # 8 on back of form)

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Revised 08/2002

IDAHO SECRETARY OF STATE
11/15/2002 05:00
CK: 3139 CT: 158010 BH: 646300
1 @ 20.00 = 20.00 ASSUM NAME # 2

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