



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2006 FEB 16 AM 9:18

SECRETARY OF STATE
STATE OF IDAHO

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:

CRESTVIEW MACHINE SHOP

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

RANDALL KOEHN

1280 CRESTVIEW RD, HAZELTON, ID 83335

JANICE KOEHN

1280 CRESTVIEW RD. HAZELTON, ID 83335

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

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

Submit Certificate of
Assumed Business
Name and \$25.00 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:

CRESTVIEW MACHINE SHOP

1280 CRESTVIEW ROAD

HAZELTON ID 83335

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

D.L. EVANS BANK

P.O. BOX 1188

BURLEY, ID 83318

Phone number (optional):

Signature: _____

(signature required)

Printed Name: _____

Randall Koehn

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
02/16/2006 05:00
CK: 9833854 CT: 158010 BH: 938005
1 @ 25.00 = 25.00 ASSUM NAME # 2

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