

Capacity/Title: sole proprie

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFEL TOLE

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

2004 MAR II AM 9: 01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

	STATE OF IDAHO
1. The assumed business name which the under	ersigned use(s) in the transaction of
business is:	
Palouse Hocess	Servers (P.P.S.)
1 WIDUSE HOCESS	<u> </u>
2. The true name(s) and <u>business</u> address(es)	of the entity or individual(s) doing
business under the assumed business name	
Name	Complete Address
Michael + Angela Spellman	676 N. Polk St.
Truchael + Higera Spellingi _	.4.1
	Moscow, ID 83843
O The second three of the second transport and second	to the commend business makes in
The general type of business transacted und	er the assumed business name is:
Retail Trade Transportation a	and Public Utilities
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
10	Basement West
Michael & Angela Spellmag	PO Box 83720
6.76 11 Polk St	Boise ID 83720-0080
Moscow, ID 83843	208 334-2301
	Diameter and the second second
5. Name and address for this acknowledgmen	t Phone number (optional):
COPy IS (if other than # 4 above):	(208)892-3636
	-
	Secretary of State use only
	02/1001
	18 (1),1408 /
gnature: Characoellman	IDAHO SECRETARY OF STATE 93/11/2004 05:00 CK: 616 CT: 177374 BH: 732428 1 @ 25.00 = 25.00 ASSUM MANE #
(signiature required)	IDAHO SECRETARY OF STATE 93/11/2004 05:00 CK: 616 CT: 177374 BH: 732428 1 0 25.00 = 25.00 ASSIM MANE #
inted Name: Ancieta Spellman	6 8 03/11/2004 05:00 CK: 616 CT: 177374 BH: 732428
	1 0 25.00 = 25.00 ASSUM NAME #

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