

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

FILED/EFFECTIVE

the undersigned

Business Name: STATE SECRETARY OF STATE

- SECRETARY OF STATE
ad us (s) in the trans

PRO EDGE
Pro Edge

- | Name | Complete Address |
|----------------|------------------------------|
| J. Phil Howard | 1525 S. LIZANSO BLVD ID 8370 |
| | |
| | |

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

- 1525 S. LIZASO
-
- BOISE ID 83709
-

- SAME AS # 4

Printed Name: J. Phil Howard

(see instruction # 8 on back of form)

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

IDAHO SECRETARY OF STATE

1 @ 20.00 = 20.00 ASSUM NAME # 2

D. 32720

Revision 12/99

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