Capacity/Title: <u>נס-סש</u>קביר

(see instruction #8 on back of form)

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. *** SEP 12 AM 9:00

Please type or print legibly. NOTE: See instructions on reverse before filing.

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

Name	: Complete Address
JAMES R Dodge	259 PAINTER Rd
MAE L SEABROOK	Clark Fork, 1d 83811
The general type of business transacted under	er the assumed business name is:
	an d Public Utiliti es
 Wholesale Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 	Secretary of State 700 West Jefferson Basement West
259 PMNTER Rd Clo-h Forh, ld 23811	PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional):
same as 4	Secretary of State use only

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