

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

FILED



To the SECRETARY OF STATE, STATE OF IDAHO

99 APR 30 AM 10:00

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name:

STATE OF IDAHO

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

Shirley Vold Ministries

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

Name	Complete Address
<u>Shirley Renee Vold</u>	<u>P.O. Box 451 Post Falls, Id. 83854</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<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

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

Shirley Vold Ministries
P.O. Box 451
Post Falls, Idaho 83854

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

Signature: Shirley R. Vold

Printed Name: Shirley R. Vold

Capacity: President

(see instruction # 8 on back of form)

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

Secretary of State use only

IDAHO SECRETARY OF STATE

04/30/1999 09:00
CK: 92858222300 CT: 114851 DH: 212290

1 @ 20.00 = 20.00 ASSUM NAME # 2

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