



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

01 JUN 18 AM 9:17

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:

Hamblin And Associates

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
<u>Wayne J Hamblin</u>	<u>2741 Hallon St. Idaho Falls ID 83402</u>
_____	_____
_____	_____

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 **\$20.00** 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:

Hamblin And Associates
2741 Hallon St
Idaho Falls ID 83402

Phone number (optional):

208-557-0243

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

Signature: Wayne J Hamblin

Printed Name: Wayne J Hamblin

Capacity: Sole Proprietor (Owner)
(see instruction # 8 on back of form)

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Secretary of State use only

IDAHO SECRETARY OF STATE

06/18/2001 09:00
CK: 2268001638 CT: 147753 BH: 403370

1 @ 20.00 = 20.00 ASSUM NAME # 2

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