

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2004 NOV 12 AM 9: 44

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

Sahalee Co	nsulting
The true name(s) and business address(es) or business under the assumed business name:	f the entity or individual(s) doing Complete Address P.O. Box 38, Cottonwood, ID. 83522 (# 9 Bear Ridge Rd.)
3. The general type of business transacted unde	er the assumed business name is:
Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: William F. Wilson - Sahalee Consulting P.O. Box 38 Cottonwood, ID. 83522 5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 208-839-2643
	Secretary of State use only
rinted Name:	IDAHO SECRETARY OF STATE 1 1 / 1 2 / 2 0 0 4 0 5 = 0 CK: 96 CT: 158818 BH: 7761 1 8 25 88 = 25 88 ASSUM MAR