

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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2002 DEC -6 AM 9:25

STATE OF IDAHO

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

LAR Consulting

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>Lori Ann Roudenbush</u>	<u>1019 W. 5th St.</u>
	<u>Filer, ID 83328</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	

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

Lori Roudenbush  
1019 W. 5th St.  
Filer, ID 83328

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

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

Phone number (optional):

208-326-3624

Signature: Lori Roudenbush  
(signature required)

Printed Name: Lori A. Roudenbush

Capacity/Title: President

(see instruction # 8 on back of form)

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 Revised 09/2002

Secretary of State use only

12/06/2002 05:00  
 CK: 1365 CT: 158010 BH: 649863  
 1 @ 20.00 = 20.00 ASSUM NAME # 2

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