

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

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



97 JUN 25  
SECRETARY OF STATE  
STATE OF IDAHO

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

BARGAIN STATION FURNITURE

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>DARVIN PEDERSEN</u>	<u>601 N. ORCHARD ST</u>
<u>DONCE PEDERSEN</u>	<u>601 N. ORCHARD ST</u>

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" 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: Phone number (optional): 208-327-8454

BARGAIN STATION FURNITURE  
601 N. ORCHARD ST  
BOISE, IDAHO 83706

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

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  
DATE 06/26/1997  
0900 105857 2  
CK #: 6140 CUST# 83530  
ASSUM NAME 1@ 20.00= 20.00

Signature: Darvin Pedersen

Printed Name: DARVIN PEDERSEN

Capacity: PARTNER

(see instruction # 8 on back of form)

Revision 2/97 g:\csp\form\slabn.pmb

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