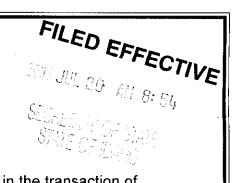


(see instruction # 8 on back of form)

## **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.



SHEA LOGGING		_
<ol><li>The true name(s) and business address(es) of the business under the assumed business name:</li></ol>	entity or individual(s) doing	
Name	Complete Address	
DENNIS SHEA 31850 HWY	1.41, BLANCHARD ID 8.	38
JACQUELLN SHEA Same		_
		_
3. The general type of business transacted under the	assumed husiness name is:	
. The general type of business transacted under the	, assumed business name is.	
Retail Trade Transportation and P	ublic Utilities	
Wholesale Trade Construction		
Services Agriculture	Submit Certificate of	
☐ Manufacturing ☐ Mining	Assumed Business	
	Name and \$25.00 fee to:	
Finance, Insurance, and Real Estate		
. The name and address to which future	Secretary of State	
correspondence should be addressed:	700 West Jefferson	
SHEA LOLLING	Basement West PO Box 83720	
	Boise ID 83720-0080	
31850 HIGHWAY 41	208 334-2301	
BLANCHARD ID 83804		
5. Name and address for this acknowledgment	Phone number (optional):	
COpy is (if other than # 4 above):		
	Secretary of State use only	
	Secretary of State use only	
abn.p65	Secretary of State use only	
nature: Signature required)	Secretary of State use only	
rature: Show ted Name: Dennis Show	IDAHO SECRETARY OF STA	TF
nature: Show some source of the state of the	IDAHO SECRETARY OF STA	