

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FUED EFFECTIVE 2005 JM 13 A 10-1

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.

The fact of the verse before fining.	
The assumed business name which the undersiged business is:	ned use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name:  Name Peter A. Henry  Nancy L. Henry (spouse)  Sau	e entity or individual(s) doing  al ) Complete Address 10 83856  1 Albeni Hwy (Hwy 2) Priest River, 1 address 1 467, P.R., 1083856
3. The general type of business transacted under th	e assumed business name is:
Retail Trade	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):
COPy is (if other than #4 above):	<u> 208 - 448 -111</u> 2
	Secretary of State use only
Signature: ALL ALLY  Signature: PETER A. HENRY  Capacity/Title: Sole Propic for (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 26/13/2005 05:00 CK: 5549 CT: 15AATA RM: A1554A

1 8 25.00 = 25.00 ASSUN NAME # 2

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