

Capacity/Title: OWNER

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED LEFECTIVE

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. 2004, APR -2 AM 9: 14

	INAHATE
The assumed business name which the undersign	ned use(s) in the transaction of
business is: Pronto Legal Ser	vices
 The true name(s) and <u>business</u> address(es) of the business under the assumed business name: 	e entity or individual(s) doing
Name	Complete Address
Chery L. Dofelmire	PO BOX 295
	ringston, Id 83839
3. The general type of business transacted under the	e assumed business name is:
Retail Trade Transportation and F Wholesale Trade Construction	Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Cheryl L. Welmire	PO Box 83720
PO BOX 295 Kingston, ID 83839	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
Americanwest Banks 120 Railroad Ave.	Secretary of State use only
hellogg, ID 83837	
Signature: Cheryl L. Dofelmine Printed Name: CHERYL L. Dofelmine	
Printed Name: CHERY! L. Dofelmire	IBAHO SECRETARY OF STATE

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94/02/2004 95:00

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