

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/ENTERED

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 Name01 JUN 11 AM 9:19
SECRETARY OF STATE OF IDAHO

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

Gale & Sons Pivot Service

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

<u>Name</u>	<u>Complete Address</u>
J Gale Bortz	933 E 100 S Declo, ID 83323
Ronald Bortz	1400 S Hwy 27 Oakley, ID 83346

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input 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): _____

J Gale Bortz
933 E 100 S Declo, ID 83323

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):

D.L. EVANS BANK
BOX 87

TWIN FALLS, IDA. 83303

Signature: J. Gale Bortz

Printed Name: J. Gale Bortz

Capacity: Co-Owner - Partner

(see instruction # 8 on back of form)

Revision 297

9 corpformstabin pm6

Secretary of State use only
IDAHO SECRETARY OF STATE
06/11/2001 09:00
CX: 6629 CT: 24085 BH: 402889
1 & 20.00 = 20.00 ASSUM NAME # 2

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