



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**FILED EFFECTIVE**

2006 AUG 31 AM 9:14

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

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

WeiBes Schloss

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

Name

Complete Address

MICHAEL J. SHRIVER

409 LIVEOAK, MARSHING, ID 83639

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

4. The name and address to which future correspondence should be addressed:

WeiBes Schloss

PO Box 434

MARSHING, ID. 83639

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

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):

Signature:

(signature required)

Printed Name:

MICHAEL J. SHRIVER

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE  
08/31/2006 05:00  
CK: 2074 CT: 203967 BH: 973018  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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