



CERTIFICATE OF ASSUMED BUSINESS NAME

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

To the SECRETARY OF STATE, STATE OF IDAHO

98 MAR 20 AM 9:59

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE
STATE OF IDAHO

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

HEROX HOWELL

2 1/2 S on Hwy 167 Hamidah.

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

Name
Robert Howell

Complete Address

P.O. Box 1136 Hamidah Id.

Kathleen Howell

P.O. Box 1136 Hamidah Id.

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

- | | | |
|--|--|--|
| <input checked="" 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 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): _____

HEROX HOWELL
P.O. Box 1136

Submit Certificate of
Assumed Business
Name and \$20.00 fee to: