



# CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED EFFECTIVE

2004 AUG 23 A 8 37

SECRETARY OF STATE  
STATE OF IDAHO

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

Hummingbird Lites

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

Jean M Davis

P.O. Box 152

Troy, ID 83871

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:

Hummingbird Lites  
P.O. Box 152  
Troy, ID 83871

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):

Secretary of State use only

Signature: Jean M. Davis  
(signature required)

Printed Name: Jean M. Davis

Capacity/Title: owner

(see instruction # 8 on back of form)

g:\icorp\forms\labn\_forms\labn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
08/23/2004 05:00  
CK: 1332 CT: 158018 BH: 762208  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 79360