



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 JAN 19 AM 9:32

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:

Northwest Finance & Collections

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

Name

Terri L. Haley

Complete Address

514 Oak St., Sandpoint, ID 83864

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

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

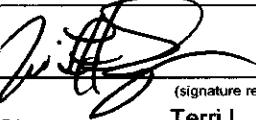
Northwest Finance & Collection

514 Oak St.

Sandpoint, ID 83864

Phone number (optional):

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

Signature: 
(signature required)

Printed Name: Terri L. Haley

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

P1073V5

IDaho SECRETARY OF STATE
01/19/2007 05:00
CK: 1416 CT: 208674 BH: 1027213
1 0 25.00 = 25.00 ASSUM NAME # 2