

Signature:

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2001 1111-1 PH 2: 37

MAIL OF IDAHO

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. 1. The assumed business name which the undersigned use(s) in the transaction of business is: y c. July Advantage Mortgage 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name 445 N. Capital Suite # 6 Idaho Falls, ID 83402 Mary 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of **Assumed Business** Mining Manufacturing Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODV IS (if other than # 4 above): (208) 716-1542 Secretary of State use only

kcorp/forms/abn forms/abn Revised 04/2003

IBANO SECRETARY OF STATE

96/92/2004 95:00

CK: 1823 CT: 158618 BH: 748189

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