

# CERTIFICATE OF ASSUMED BUSINESS NAME

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



To the SECRETARY OF STATE, STATE OF IDAHO

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

gives notice of adoption of an Assumed Business Name **63 JUN 10 AM 8:29**

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

**CROWS**

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	Complete Address
<u>STEVE WILKINSON</u>	<u>6007 EASTWOOD PL BOISE 83712</u>
<u>RICK CROSSLAND</u>	<u>475 SW STRINGTOWN RD, FOREST GROVE</u> <u>OREGON 97116</u>

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" 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): \_\_\_\_\_

**CROWS**  
6007 EASTWOOD PL  
BOISE ID 83712

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

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

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

06/10/1998 09:00  
CK: 2759 CT: 99065 DI: 110221

1 @ 20.00 = 20.00 ASSUM NAME

Signature: \_\_\_\_\_

Printed Name: STEVE WILKINSON

Capacity: GENERAL PARTNER

(see instruction # 8 on back of form)

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