

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.

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

Blueheart Computer Works

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>Evelyn Summers</u>	<u>P.O. Box 632, Hagerman, ID</u>
<u>Ronald Summers</u>	<u>ID 83332</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 type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" 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): (208) 837-6304

Blueheart Computer Works
P.O. Box 632
Hagerman ID 83332

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

Evelyn Summers
Ronald Summers

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

10/12/1999 09:00
CK: 1493 CT: 121623 BH: 257249

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 29926

Signature:

Evelyn Summers

Printed Name:

Evelyn Summers

Capacity:

owner/manager

(see instruction # 8 on back of form)

Revision 2/97

6:00pm/10:00am p65

FILED

OCT 12 PM 2:59