

FILED EFFECTIVE

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 SEP 11 AM 8:14

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:

BERKENFIELD DESIGN

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

James A. Berkenfield
Susan M. Berkenfield

PO Box 450 Driggs ID 83422
PO Box 450 Driggs ID 83422

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input checked="" 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:

James A. Berkenfield
PO Box 450
Driggs ID 83422

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

Phone number (optional):

208 456 6606
(208) 270 0625 (cell) (X)

Secretary of State use only

Signature

(signature required)

Printed Name: James A. Berkenfield

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:\corp\forms\slbn forms\slbn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
09/11/2008 05:00
CK: CASH CT: 158018 BH: 1135341
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 124770