227

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

2006 DEC -7 AM 10: 16

SECRETARY OF STATE
STATE OF IDAHO

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

~~NORTON~~ NORTHWEST MARKETING PRODUCTS

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
JON T BURROWS	6190 W HARBOR DR COEUR "D" ALENE ID 83814

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

- ☐ Retail Trade
- ☑ Wholesale Trade
- ☐ Services
- ☐ Manufacturing
- ☐ Finance, Insurance, and Real Estate
- ☐ Transportation and Public Utilities
- ☐ Construction
- ☐ Agriculture
- ☐ Mining

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:

JON BURROWS
6190 W HARBOR DR
COEUR D ALENE ID 83814

Phone number (optional): _____

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

_____

Signature: Jon T Burrows
(signature required)

Printed Name: JON T BURROWS

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\abn formsabn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
12/07/2006 05:00
CK: 1008 CT: 207214 BH: 1010828
1 @ 25.00 = 25.00 ASSUM NAME # 2

D106125