



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

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.

APR 19 2 23 PM '01

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

G E G COMPANY

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

Creda Inez ARGERIS

116 N. Commercial

EMMETT, ID 83617

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

- | | | |
|--|--|--|
| <input checked="" 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 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): _____

Creda Inez Argeris

P.O. Box 959

EMMETT IDAHO 83617

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

P.O. Box 959

EMMETT ID 83617

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

04/19/2001 09:00
CK: CASH CT: 145288 BH: 392186

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Creda Inez Argeris

Printed Name: CRED A INEZ ARGERIS

Capacity: owner/operator

(see instruction # 8 on back of form)

Revision 1/98

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