

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



Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE  
STATE OF MISSISSIPPI

## American Self-Defense Systems

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

<u>Name</u>	<u>Complete Address</u>
Keith R. Owen	154 Buchanan St Jewett Falls 83301

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): 208-236-9946

154 Buchanan St

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

D.L. EVANS Bank % Greg  
Box 87  
Twin Falls, ID 83301

Signature: [Signature]

Printed Name: Keith Owen

Capacity: \_\_\_\_\_

(see instruction # 8 on back of form)

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

05/08/1998 09:00  
OK: 1989 CT: 24085 BH: 180085

1 @ 20.00 = 20.00 ASSUM NAME

#14747

Revision 2437

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