

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED/EFFECTIVE

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.

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STATE OF TOAHO

business is:	ndersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Colby R. Blewett	of the entity or individual(s) doing e: <u>Complete Address</u> <u>PO Box 356</u> <u>Grange ville, ID 83530</u>
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Colby Blewett PO Box 356 Grange ville, ID \$3530	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
<ol> <li>Name and address for this acknowledgmen copy is (if other than # 4 above).</li> </ol>	Phone number (optional):  (208) 983 1673
Signature:	Secretary of State use only  IDAHO SECRETARY OF STATE  02/25/2002 05:00  CK: 127 CT: 157835 BH: 448382  1 @ 20.00 = 20.00 ASSUM NAME # 2