



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.

JAN 31 PM 4:24

SECRETARY OF STATE
STATE OF IDAHO

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

Idaho Home Appliance Repair & Commercial Hydraulic Chair Service

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
<u>Phillip D Francke</u>	<u>10400 Overland rd #122 Boise Id 83709</u>
<u>Jolene F. Francke</u>	<u>10400 Overland rd. #122 Boise Id. 83709</u>

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): _____

10400 Overland rd. #122
Boise Id. 83709
Idaho Home Appliance Repair

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720/7
Boise ID 83720-0080
208 334-2301

Signature: Phillip Francke

Printed Name: Phillip Francke

Capacity: General Partner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

02/01/2000 09:00

CK: none CT: 126851 BH: 286310

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 12/99

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