

FILED/EFFECTIVE

227



**CERTIFICATE OF
ASSUMED BUSINESS NAME**

Pursuant to Section 63-504, 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.

2002 SEP 30 AM 8:35

DATE
1960

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

Great Northern Financial & Insurance Services

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

Shayne D. Kuebler, INC.

(8656 W. Cloverleaf DR.)

C131790

Hayden, ID 83835

PO Box 2813

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

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |
- Submit
 Assume
 Name a

4. The name and address to which future correspondence should be addressed:

Shayne D. Kuebler

PO Box 2813

Hayden, ID 83835

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

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

Phone number (optional):

208-762-7773

Secretary of State use only

Signature: Raymond J. Wobler
(signature required)

(signature required)

Printed Name: Shayne D. Kuebier

Capacity/Title: President

(see instruction # 8 on back of form)

Revised 07/2000

IDAHO SECRETARY OF STATE
09/30/2002 05:00
CK: 1688 CT: 150010 BH: 524088
1 @ 20.00 = 20.00 ASSUM NAME # 2

D58658