227

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

FILED/EFFECTIVE
00 DEC 29 AM 8:47
STATE OF IDAHO

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

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

   HOWES MANAGEMENT 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
A. DEAN HOWES	15086 LAKE AVE.
KAREN K. HOWES	NAMPA, ID 83651

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

☐ Retail Trade	☐ Manufacturing	☐ Transportation and Public Utilities
☐ Wholesale Trade	☐ Agriculture	☐ Finance, Insurance, and Real Estate
☒ Services	☐ Construction	☐ Mining

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

   HOWES MANAGEMENT SERVICE
   15086 LAKE AVE.
   NAMPA, ID 83651

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

   Farmers & Merchants State Bank
   112 2nd Street South
   Nampa, ID 83651

Signature: A. D. Howes

Printed Name: A.D. HOWES

Capacity: Owner

(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
12/29/2000 09:00
CK: 47463 CT: 45888 BH: 369764
1 @ 20.00 = 20.00 ASSUM NAME # 2

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