



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

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 of

01 FEB -2 AM 8:54  
SECRETARY OF STATE  
STATE OF IDAHO

FILED/EFFECTIVE

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

J. L. MILLIORN, GROUP

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>JOE L. MILLIORN</u>	<u>PO BOX 1224, HAYDEN, ID. 83835</u>
_____	_____
_____	_____

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

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Retail Trade    | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" 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): \_\_\_\_\_

J. L. MILLIORN  
POB 1224  
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):  
\_\_\_\_\_  
\_\_\_\_\_

Signature: [Handwritten Signature]  
Printed Name: JOE L. MILLIORN  
Capacity: OWNER

(see instruction # 8 on back of form)

g:\comp\forms\abn.p65 Revision 12/99

Secretary of State use only

IDAHO SECRETARY OF STATE  
02/02/2001 09:00  
CK: 111 CT: 141690 BH: 376500  
1 @ 20.00 = 20.00 ASSUM NAME # 2

D-42321