

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 200 111 17 11 9: 12

Please type or print legibly. NOTE: See instructions on reverse before filing.



County Eight - Crime Scene Service		
The true name(s) and <u>business</u> address(est business under the assumed business name Name Richard W. Knack	ie:	entity or individual(s) doing Complete Address Fillmore St - Twin Falls, Id 83301
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction		
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Richard W. Knack 174 Fillmore St		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
Twin Falls, Idaho 83301		208 334-2301
Name and address for this acknowledgme copy is (if other than # 4 above):	ent	Phone number (optional): (208) 736-7179
		Secretary of State use only
gnature: Lichard W. Xnark inted Name: Richard W. KNACK apacity/Title: Scark Coord DINATUR	cop/Voms/abn foms/abn.p65 Revised 04/2003	IDAHO SECRETARY OF STATE 93/17/2006 05:00 CK: 606612490 CT: 158010 BH: 943858 1 8 25.80 = 25.00 ASSUN NAME # 8

(see instruction # 8 on back of form)

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