

CERTIFICATE OF ASSUMED BUSINESS NAME

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



FILED

99 AUG -6 PM 5:12

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:

Van Handle Fabrication

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>Shawn Kuprienko</u>	<u>395 Memorial Lane</u>
	<u>P.O. Box 2176</u>
	<u>Oldtown, Id 83822</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 checked="" 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 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): 509-437-2900

Shawn Kuprienko
P.O. Box 2176
Oldtown, Id. 83822

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):

Secretary of State use only

IDAHO SECRETARY OF STATE

88/06/1999 09:00
CK: 6060327453 CT: 118094 DN: 240043

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 28215

Signature: Shawn Kuprienko

Printed Name: Shawn Kuprienko

Capacity: owner

(see instruction # 8 on back of form)

Revision 2/97