

## CERTIFICATE OF ASSUMED BUSINESS NAME



D 62538

Pursuant to Section 53-504, 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.

STATE OF TOAHO

	INVIII
The assumed business name which the undersibusiness is:	
CONTINENTAL INSURANCE	e Brokers
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	the entity or individual(s) doing
Name RANDAIL F. PROPL 20.	Complete Address 19 RANCH ROAD NAMPA IN 83 19 RANCH ROAD NAMPA ID 836
3. The general type of business transacted under	the assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction	d Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  RANDAL ROAD  VAM DA LOAD 83686	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): 208-466-173/
	Secretary of State use only
Signature: Vovalul Hold Signature required Printed Name: RANDAL F PROBL  Capacity/Title: Owner Constitution of the Capacity Signature required Problem Signa	IDAHO SECRETARY OF STATE  92/18/2003 05:00  CK: 2376 CT: 158018 BH: 663458  1 2 20.00 = 20.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	· · · · · · · · · · · · · · · · ·