



# CERTIFICATE OF ASSUMED BUSINESS NAME

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.**

**FILED EFFECT**  
2006 JUL 10 AM 9:50

SECRETARY OF STATE  
STATE OF IDAHO

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

Needmore Acres

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

| <u>Name</u>             | <u>Complete Address</u>         |
|-------------------------|---------------------------------|
| <u>William Lefebvre</u> | <u>HC 60 Box 271</u>            |
|                         | <u>Bonniers Ferry, ID 83805</u> |

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                            | <input checked="" type="checkbox"/> Agriculture/Ranch        |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

William Lefebvre  
HC 60 Box 271  
Bonniers Ferry ID 83805-0518

Submit Certificate of  
Assumed Business  
Name and ~~\$25.00~~ 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):

Phone number (optional):

208-267-7378

Signature: Wm Lefebvre  
(signature required)

Printed Name: William Lefebvre

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

010/612

IDAHO SECRETARY OF STATE  
07/10/2006 05:00  
CK: 6272 CT: 150010 BH: 963989  
1 @ 25.00 = 25.00 ASSUM NAME # 2