

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



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:

Harten Tax Service

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>William Harten</u>	<u>1323-10th St.</u>
	<u>Idaho Falls, ID 83404</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 type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input checked="" type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

SEE ATT

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

Harten Tax Service  
1323-10th St.  
Idaho Falls, ID 83404

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: W. Harten

Printed Name: W. Harten

Capacity: Sole Proprietor

(see instruction # 8 on back of form)

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

Secretary of State use only

IDAHO SECRETARY OF STATE

05/08/1998 09:00  
 CK: 7246 CT: 90413 BH: 100075

1 @ 20.00 = 20.00 ASSUM NAME

\* 14752

Revision 2/87

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# SOLE PROPRIETORSHIP RESOLUTION OF AUTHORITY

By: Harten Tax Service  
1323-10th St  
Idaho Falls ID, 83404  
 (City, State, and Zip Code)  
None  
 (Proprietor's Federal Tax ID Number)

Date: May 5, 1998

I hereby certify that I, William Harten the undersigned, am engaged in business under the trade name of Harten Tax Service and that I am the sole owner of said company. In consideration of your acceptance of this Account under the above-designated trade name, and/or for the purpose of cashing or negotiating checks, drafts or other negotiable instruments payable to said trade name, and endorsed in said trade name, by myself as owner, or by those authorized below I agree that:

- (1) The Financial Institution named above is designated as a depository for the funds of this proprietorship
- (2) This resolution shall continue to have effect until express written notice of its rescission or modification has been received and recorded by this Financial Institution.
- Any and all prior resolutions adopted by this proprietorship and presented to this Financial Institution as governing the operation of this proprietorship's account(s), are in full force and effect, unless supplemented or modified by this authorization.
- (3) All transactions, if any, with respect to any deposits, withdrawals, rediscounts and borrowings by or on behalf of this proprietorship with this Financial Institution prior to the adoption of this resolution are hereby ratified, approved and confirmed.
- (4) Any of the persons named below, so long as they act in a representative capacity as agents of this proprietorship, are authorized to make any and all other contracts, agreements, stipulations and orders which they may deem advisable for the effective exercise of their powers indicated below, from time to time with this Financial Institution, concerning funds deposited in this Financial Institution, moneys borrowed from this Financial Institution or any other business transacted by and between this proprietorship and this Financial Institution subject to any restrictions stated below.
- (5) I warrant that I am the sole owner of the business whose trade name is given on this form. If any other parties acquire an ownership interest in the business (for example, if I were to include a partner in ownership or if I were to incorporate), or if the ownership of the business is changed or restructured in any way, I shall notify this Financial Institution promptly. In the event ownership is changed in any way and I don't notify this Financial Institution of that fact, I will remain fully liable personally in accordance with the terms of this resolution and any account agreements that I have signed.
- (6) This proprietorship agrees to the terms and conditions of any account agreement, properly opened by any authorized representative(s) of this proprietorship, and authorizes the Financial Institution named above, at any time, to charge this proprietorship for all checks, drafts, or other orders for the payment of money, that are drawn on this Financial Institution, regardless of by whom or by what means the facsimile signature(s), if any, may have been affixed so long as they resemble the facsimile signature specimens below (or the facsimile signature specimens that this proprietorship files with this Financial Institution from time to time) and contain the required number of signatures for this purpose.

If indicated, any person listed below (subject to any expressed restrictions) is authorized to:

Name and Title	Signature	Facsimile Signature
(A) <u>W. Harten</u>	<u>W. Harten</u>	<u>[Signature]</u>
(B) _____	_____	_____
(C) _____	_____	_____
(D) _____	_____	_____

Indicate A, B, C and/or D

- |          |   |
|----------|---|
| <u>A</u> | (1) Exercise all of the powers listed in (2) through (6).   |
| <u>A</u> | (2) Open any deposit or checking account(s) in the name of this proprietorship  |
| <u>A</u> | (3) Endorse checks and orders for the payment of money and withdraw funds on deposit with this Financial Institution  |
|          | Number of authorized signatures required for this purpose <u>one</u>  |
| <u>-</u> | (4) Borrow money on behalf and in the name of this proprietorship, sign, execute and deliver promissory notes or other evidences of indebtedness.   |
|          | Number of authorized signatures required for this purpose <u>-</u>  |
| <u>A</u> | (5) Endorse, assign, transfer, mortgage or pledge bills receivable, warehouse receipts, bills of lading, stocks, bonds, real estate or other property now owned or hereafter owned or acquired by this proprietorship as security for sums borrowed, and to discount the same, unconditionally guarantee payment of all bills received, negotiated or discounted and to waive demand, presentment, protest, notice of protest and notice of non-payment |
|          | Number of authorized signatures required for this purpose <u>one</u>  |
| <u>-</u> | (6) Enter into written lease for the purpose of renting and maintaining a Safe Deposit Box in this Financial Institution  |
|          | Number of authorized persons required to gain access and to terminate the lease <u>-</u>  |

Optional Notarization:

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

Notary Public

Signature of Proprietor

W. Harten  
W. Harten  
 (Type Name of Proprietor Below Signature)