

227



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/EFFECTIVE

01 MAR 22 AM 10:21

STATE OF IDAHO

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

Pottersfield

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

Name

Complete Address

Thalia Potter
and

6495 River RD
Clark Fork ID
83811

Brian Potter (partner)

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 checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <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:

6495 River RD
Clark Fork ID
83811

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

Signature: Thalia Potter

Printed Name: Thalia Potter

Capacity: owner

(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

Phone number (optional):

208-266-0330

Secretary of State use only

IDAHO SECRETARY OF STATE

03/22/2001 09:00
CX: 2845 CI: 144019 BH: 386472

1 @ 20.00 = 20.00 ASSUM NAME # 2

D43795

0-complimentary form valid p85
Revised 01/2001