Signature:

Printed Name:

Capacity: UWNE

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on Peyers DIEFFECTIV Pursuant to Section 53-504, Idaho Code, the undersigned UG -2 Ail 8: 37 1. The assumed business name which the undersigned use(s) in the spacetion of business is: CANYON West 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address -ONNIE SKOGSberg 11263 LASTER LANE 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Minina 4. The name and address to which future Phone number (optional): 208-467-7506 correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only

IDAHO SECRETARY OF STATE

**08/02/2000 09:00** CK: 4857 CT: 134259 BH: 338173

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