

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.

97 MAY 19 PM

SECRETARY OF STATE
STATE OF IDAHO



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

A-1 NOTARY SERVICES

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

STEPHANIE K. ATKINSON

606 HANKINS ROAD NORTH

TWIN FALLS, ID 83301

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 type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

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

STEPHANIE K. ATKINSON

606 HANKINS ROAD NORTH

TWIN FALLS, ID 83301

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

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

Signature: Stephanie K. Atkinson

Printed Name: Stephanie K. Atkinson

Capacity: owner

(see instruction # 8 on back of form)

Revision 2/97

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IDAHO SECRETARY OF STATE
DATE 05/19/1997
0900 94131 2
CK #: 963 CUST# 81680
ASSUM NAME 18 20.00= 20.00

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