



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

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:

Lancaster Computer

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
Michael Lancaster	1309 N. William Post Falls, ID 83854
Evelyn Lancaster	1309 N. William Post Falls, ID 83854

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 ☐ Mining

4. The name and address to which future correspondence should be addressed: _____ Phone number (optional): (208) 777-3105

correspondence should be addressed
Michael or Evelyn Lancaster

1309 N. William

Post Falls, ID. 83854

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: Michael Lancaster

Printed Name: Michael Lancaster

Capacity: Owner

(see instruction # 8 on back of form)

Revision 12/99

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04/12/2002 05:00
CK: 6871 CT: 158010 BH: 458953
1 @ 20.00 = 20.00 ASSUM NAME # 2

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