

# 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.

SECRETARY OF STATE OF IDAHO  
MAR 13 1997



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

North Idaho Tool Repair

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>Randy L. Johnson</u>	<u>610 E 15th</u>
<u></u>	<u>Post Falls, ID. 83854</u>
<u></u>	<u></u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

<input checked="" 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:

Randy L. Johnson  
610 E 15th  
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

IDAHO SECRETARY OF STATE

Secretary of State use only  
0371371998-09:00  
CK: 3730305447 CI: 95651 BH: 90579

1 @ 20.00 = 20.00 ASSUM NAME

Signature: Randy L. Johnson

Printed Name: RANDY L. JOHNSON

Capacity: SOLE PROPRIETOR

(see instruction # 8 on back of form)

8 completion and  
Revision 2/87

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