

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2003 AUG 27 AM 8: 54

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE OF IDAHO

		STATE OF IDAIR	
 The assumed business name which the und business is: 	dersigne	d use(s) in the transaction of	
Bluebird Portable Toil	els		
The true name(s) and business address(es) business under the assumed business nam		entity or individual(s) doing	
Name		Complete Address	
Kelly G. Walfe	40 Oa	kwood #57 Pocatello Ide	aho 832
			_
3. The general type of business transacted und	der the a	ssumed business name is:	
Retail Trade Transportation	and Dub	olic I Itilities	
Retail Trade I ransportation Wholesale Trade Construction	and Ful	ne ountes	
Services Agriculture		Submit Certificate of	
Manufacturing Mining		Assumed Business	
Finance, Insurance, and Real Estate		Name and \$25.00 fee to:	
4. The name and address to which future		Secretary of State	
correspondence should be addressed:	\	700 West Jefferson Basement West	
Kelly G. Wolfe (Bluebird Portable To	silets)	PO Box 83720 Boise ID 83720-0080	
P. O. Box 2123		208 334-2301	
Pocatello, Idaho 83206			!
5. Name and address for this acknowledgmer	nt	Phone number (optional):	
COPy is (if other than # 4 above):		(208) 478-1593	\
		390 - 4702 (call phone Secretary of State use only	<u>.</u>)
		ootically of calle doc only	
NOO MILA	3bn.p65	068270	
Signature: Kelly W. Wolfe (signature required)	forms\e	TAWA AFAN-	
Printed Name: UKelly G. Wolfe	\corp\forms\abn forms\abn.p65 Revised 04/2003	IDAHO SECRETARY OF STA 98/27/2003 05 CK: 678 CT: 158010 BH: 6: 1 0 25.00 = 25.00 OCCUPANT	TE 90
Capacity/Title: Owner	toorp\fq R	1 M 25 GO 220010 1911 61	98551 NAME # 2