

# 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 State of Idaho in the transaction of business is:

ALMO CREEK OUTPOST

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>DARWIN L. BYWATER</u>	<u>P.O. BOX 139</u>
<u>DARLA ROCKWOOD BYWATER</u>	<u>ALMO ID 83311</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: Phone number (optional): \_\_\_\_\_

SAME

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

SAME - PLUS  
D.L. EVANS BANK  
BOX 517  
ALBION ID 83311

Signature: Darla Rockwood Bywater

Printed Name: DARLA ROCKWOOD BYWATER

Capacity: OWNER

(see instruction # 8 on back of form)



FILED

99 MAY 19 AM 8:55

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

IMMD SECRETARY OF STATE

05/19/1999 09:00  
CX: 266 CT: 115726 IN: 216134

10 20.00 = 20.00 ASSUM NAME 12

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