CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

	To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idal gives notice of adoption of an As	ho Code, the	undersigned 20 10 57 AM 198
1.	The assumed business name which the un business is:		The state of the s
	KUEHL HOMES		
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		mplete Address
	NANCY KUEHL	P.	O. BOX 816 MERIDIAN, IDA 83642
	RONDA PATTERSON	3935	W. TETER MERIDIAN, IDA
	RONALD G. KUEHL	P.	O. Box 816 MERIDIAN, 183642
3.	The general type of business transacted ur (mark only those that apply)	nder the assu	umed business name is:
	☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☒ Construction	Fir	ansportation and Public Utilities nance, Insurance, and Real Estate ning
4.	The name and address to which future correspondence should be addressed:	hone numbe	er (optional):
	KUEHL HOMES		Submit Certificate of
	P.O. BOX 816		Assumed Business Name and \$20.00 fee to:
	MERIDIAN,IDA 83642		Secretary of State
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		1/88	Secretary of State use only IDAHO SECRETARY OF STATE
Signatu	Name: NANCY Kuchl	Revision 1/88	12/28/1998 89:00 CX: 1156 CT: 99478 BH: 173474 1 # 28.88 = 28.86 ASSUN NAME # 4
Printed	Name: NANCY Kuehl	₹	~
Capaci	ity: General Partner	stabn.p	D.21492
Jupaul	(see instruction # 8 on back of form)	corpYorms\abn.p05	