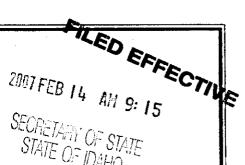


CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

IOTE: See instructions on reverse before filing.



NOTE: See instructions on reverse before filing.	STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of	
himaaa ia.	
4C Framino & Co	metruction
2. The true name(s) and business address(es) of the entity or individual(s) doing	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
JAMES CORNELIA	7417 95 Ave
ZAWIES CONSTRU	Lewiston IP.
	93001
	A 33 - 1
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Public Utilities	
☐ Wholesale Trade ☑ Construction	
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
Same AS ABove	PO Box 83720 Boise ID 83720-0080
	208 33 4 -2301
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	208-791-0890
	Secretary of State use only
8	
I di	
Printed Name: JAMES COLNCIA	
Printed Name: JAMES COLNICIA	IDAHO SECRETARY OF STATE
Signature: Jumn Chi (signature required) Printed Name: JAMES CORNCLA Capacity/Title: Gunel	CK: 19834 CT: 158010 BH: 1933240 1 0 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	T & C7:00 . C7:00 MOTOR MAINT & C
	1208187