

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/CFFCCTIVE

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

Aug 2 10 in AM '01

Please type or print legibly. NOTE: See instructions on reverse before filing.

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d The resumed by the second se		STATE OF IDAHO
 The assumed business name which the und business is: 	lersigne	ed use(s) in the transaction of
ELLIOTT BOO	>K5	
2. The true name(s) and <u>business</u> address(es)	of the e	ntity or individual(s) doing
business under the assumed business name: Name		Complete Address
MIKE Elliott Construction IN	C.	Complete Address
C 1171040	<u>, </u>	11267 GILA DR. KUNA, JD. 83634
		710NA, 1A, 83639
2. The general time of husiness to a		
The general type of business transacted und	der the a	assumed business name is:
Retail Trade Transportation	and Pu	blic Utilities
Wholesale Trade Construction		
Services Agriculture		Submit Certificate of
☐ Manufacturing ☐ Mining		Assumed Business Name and \$20.00 fee to:
☐ Finance, Insurance, and Real Estate		Name and \$20.00 fee to:
4. The name and address to which future		Secretary of State
correspondence should be addressed:		700 West Jefferson Basement West
11267 GILA DR.		PO Box 83720
KUNA, IS. 83634		Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen	t	Phone number (optional):
COPY IS (if other than # 4 above):		
	<u></u>	
		Secretary of State use only
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Signature: Susie K. ECC, 874	forms\a	IDANO SECRETARY OF STATE
Printed Name: Susie K. Elliott	forms\abo forms\ Revised 01/2001	68/03/2001 65:00 CK: 5887 CT: 149641 BH: 411588
Capacity: VICE PRESIDENT	g 'Corptformstabn formstabn.p65 Revised 01/2001	1 8 28.86 = 29.88 ASSUM NAME # 2
(see instruction #8 on back of form)	9	N 211
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