227	
CERTIFICA	
ASSUMED BUS	
Pursuant to Section 53-504, Id submits for filing a certificate o	of Assumed Business Name.
Please type or print NOTE: See instructions on rev	avarea hafara filing
	STATE OF IDAHO
 The assumed business name wh business is: 	hich the undersigned use(s) in the transaction of
	+ Fabrication
2. The true name(s) and <u>business</u> a business under the assumed bus	address(es) of the entity or individual(s) doing
Name	<u>Complete Address</u>
James R. Hayde	en 5509 annast. Boise, Idaho
/	<u>83705</u>
3. The general type of business tran	ansacted under the assumed business name is:
	ansportation and Public Utilities
	onstruction griculture
	ining Assumed Business
Finance, Insurance, and Re	Real Estate Name and \$20.00 fee to:
 The name and address to which f correspondence should be addres 	
	Basement West
James R. Hayder 5809 anna St.	Boise ID 83720-0080
Boise, Idahu, 8370	208 334-2301
5. Name and address for this ackn	nowledgment Phone number (optional):
CODY IS (if other than # 4 above):	342-8641
	Secretary of State use only
Signature: Jamo R Narph	IDAHO SECRETARY OF STATE Y du IDAHO SECRETARY OF STATE
Printed Name: James R. Hay	IDAHO SECRETARY OF STATE GO
Capacity/Title:	K: CASH CT: 156018 BH: 486188 1 20.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	D57928