

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

## FILED EFFECTIVE

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SECRETARY OF STATE
STATE OF IDAHO

submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: **Covenant Technologies** 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address **Kevin Jones** 1517 Alder Drive Lewiston, Idaho 83501 **Todd Buchanan** 385 n 30th #101 Boise, Idaho 83702 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: **Basement West Kevin Jones** PO Box 83720 Boise ID 83720-0080 1517 Alder Drive 208 334-2301 Lewiston, Idaho 83501 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only

Signature: (signature required)

Printed Name:

Kevin Jones

Capacity/Title: Co- Owner
(see instruction # 8 on back of form)

g/corp/forms/abn forms/abn.p65 Revised 04/2003

IDAHO SECRETARY OF STATE

03/20/2006 05 = 00

CK: 1085 CT: 158010 RH: 944290

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