

Capacity/Title: <u>OWWE</u>

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

09 MAR 26 AM 8= 30

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersign business is:      AUNT ACTUR CONSTRUCT	- 1
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  MICHAEL TOWNSHIP  866	entity or individual(s) doing  Complete Address  Complete Address  Complete Address
3. The general type of business transacted under the Retail Trade Transportation and P  Wholesale Trade Construction	
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  MCHALL TOURSEND	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
8680 W. Z/ON <u>VATHDOWN ND 83858</u> 5. Name and address for this acknowledgment	(208) 334-2301
CODY IS (if other than # 4 above):	Secretary of State use only
Signature: Signature required)  Signature TOLA (Signature required)	
Printed Name: MW TOWNSMAD	IDANO SECRETARY OF STATE

IDAHO SECRETARY OF STATE

@3/26/2009 @5:00

CX: 5418 CT: 235464 BH: 1162962

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