

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. NOTE: See Instructions on reverse before filing. FILED EFFECTIVE 2006 JUL 19 AM 8: 33

SECRETARY OF STATE STATE OF IDAHO

johnson co	nstrution
The true name(s) and business address(es) of business under the assumed business name:	of the entity or individual(s) doing : Complete Address 604 6th street parma ID.83660
	- San January Carlos Ca
3. The general type of business transacted und	er the assumed business name is:
	and Public Utilities
Wholesale Trade ✓ Construction Services ✓ Agriculture Manufacturing ✓ Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: sean johnson 604 6th st. parma ID.83660	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above).	nt Phone number (optional): 1775 835 6714
	Secretary of State use only
gnature:	IDAHO SECRETARY OF STATE
apacity/Title: OWNER (see instruction # 6 on back of form)	IDAHO SECRETARY OF STATE 67/19/2006 05:00 CK: 344 CT: 202508 BH: 96559

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