7	FILED EFFECTIVE
CERTIFICATE OF ASSUMED BUSINESS NAI Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business Please type or print legibly. Instructions are included on back of application	signed Name. SECRETARY OF STATE STATE OF DALLO
1. The assumed business name which the undersign business is: Black Diamond Contractine	ned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: <u>Name</u> <u>Reggy W: Morgan</u> <u>365</u>	e entity or individual(s) doing <u>Complete Address</u> I Galway Circle, Post Falls, ID 83854
 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 	
 4. The name and address to which future correspondence should be addressed: <u>Peggy W Morgan</u> <u>3651 Galway Circle</u> <u>Post Falls, ID 83854</u> 5. Name and address for this acknowledgment copy is (if other than # 4 above): 	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature:	Secretary of State use only IDAHO SECRETARY OF STATE 10/17/2014 05:00 CK:1039205696 CT:158010 BH: 16 25.00 = 25.00 ASSUM NA
Printed Name: Capacity/Title:	D174377

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