

Capacity/Title: OWNER

(see instruction # 8 on back of form)

## 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.

D. THE BROOK	Builders.
2. The true name(s) and business address(es business under the assumed business nam Name  THOMAS W. GARRISON	S) of the entity or individual(s) doing ne:  Complete Address  5685 Huy 8  Dearry ID 83823
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  STONE BROOK BULLDENS  5685 Hwy 8  DEARY, T.D. 83823	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
<ol> <li>Name and address for this acknowledgmer copy is (if other than # 4 above):</li> </ol>	Phone number (optional):
	Secretary of State use only

IDAHO SECRETARY OF STATE 97/95/2005 95:00 CK: 115 CT: 158010 BH: 819444 1 0 25.00 = 25.00 ASSUM MANE # 2

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