## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2006 JAN -6 AM 9:37

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

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2. The true name(s) and business address(es) business under the assumed business name Name  Mahonri Baldwin		me:		
3. The general type	e of business transacted u	ınder the a	ssumed business name is:	
4. The name and a	Trade Construction Agriculture	1	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720	
3590 Rich Ln. Ammon, ID 83406			Boise ID 83720-0080 208 334-2301	
5. Name and add copy is (if other that	ress for this acknowledgm in # 4 above):	nent	Phone number (optional):(208)403-8155	
			Secretary of State use only	
nature:	(signature required) Mahonri Baldwin Owner	g:\corp\forms\abn.p65 Revised 04/2003	DQS170  IDAHO SECRETARY OF STAT	