

Capacity/Title: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 05 MOV 29 AM II: 33

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

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Please type or print legibly. NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersi business is: MR Construction	gned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of t business under the assumed business name: Name Michael Paran Rowley	he entity or individual(s) doing Complete Address 1834 Cristment Dr. Meridian ID 83642
3. The general type of business transacted under to Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Michael Paron Rowley 1624 Crestment On.	
5. Name and address for this acknowledgment copy is (if other than # 4 above): Signature: Michael Rowley Printed Name: Michael Rowley	Phone number (optional):