

CERTIFICATE OF ASSUMED BUSINESS NAME

ELLO EFFECTIVE

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

06 APR 25 PM 2: 24

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETATE OF STATE STATE OF IDAHO

The assumed business name which the ur business is:		
-mpire Curbing and a	ion (re	te
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Avtone Robert Steele	s) of the e	entity or individual(s) doing Complete Address
3. The general type of business transacted ur		
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future	and Pul	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
Tony Steele 267 Dundee Boise ID 83706		700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above). 	nt	Phone number (optional):
		Secretary of State use only
Signature: (signature required) Printed Name: Tony Steele Capacity/Title: Whe (see instruction # 8 on back of form)	g:\corp\forms\abn.p65 Revised 04/2003	IDAHO SECRETARY OF STATE 04/25/2006 05:00 CK: 788814 CT: 172099 BH: 951273 1 8 25.00 25.00 ASSUM NAME # 1
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