

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Dec 3 2 lu PH '

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

SECRET

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1. The assumed business name which the undersigned use(s) in the transaction of	
business is: Halicuson Construction	and Remodel
	med Remodel
2. The true name(s) and business address(es) of the er	ntity or individual(s) doing
business under the assumed business name: Name	Complete Address
<u> </u>	Complete Address N. 17th Street
Den Some Majorsone 770	DO W. 17 SHICK
3. The general type of business transacted under the a	esumed business name is:
Retail Trade Transportation and Put	olic Utilities
Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
Den J Halverson	PO Box 83720
1900 N. 17th Street	Boise ID 83720-0080 208 334-2301
Boise, ID 83702	200 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than # 4 above):	713-8815
171	Secretary of State use only
S S S S S S S S S S S S S S S S S S S	
Signature:	IDAHO SECRETARY OF STATE
Signature: Printed Name: Ben J. Halverson Capacity: Owner Capacity:	12/04/2001 05:00 CK: CASH CT: 154210 BH: 432548
Capacity: Owner to the seguence of the seguenc	1 0 20.00 = 20.00 ASSUM NAME # 2
(see instruction #8 on back of form)	

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