

## CERTIFICATE OF ASSUMED BUSINESS NAMENOV 20 PM 12: 45

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

The assumed business name which the ur business is:	
ASKCIAFT CONSTRI	sclion
2. The true name(s) and business address(expusioness under the assumed business name  Name  Curtisit Association	s) of the entity or individual(s) doing me:  Complete Address  Soc. E. Greenilurst, Manga, TD  83686
3. The general type of business transacted u	nder the assumed business name in
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080  (208) 334-2301
CODY IS (if other than #4 above).	ent 
	Secretary of State use only
nature: Circles (signature required)	IDAHO SECRETARY OF STATE  11/20/2007 05:00  CX: CASH CT: 158010 BH: 188633
nted Name: Cursis Ashcrafi	IDAHO SECRETARY OF STATE
pacity/Title:	CK: CASH CT: 158018 RH: 188627

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