27	
CERTIFICATE OF ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the uno submits for filing a certificate of Assumed Busine Please type or print legibly.	ss Name. DEC 12 11 05 1/1 101
NOTE: See instructions on reverse before fil	ling. SEGANA SEGANA SEGANA
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
business is: "NO WORKIES"	HOME INSPECTIONS
<ol><li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:</li></ol>	
Name	Complete Address
TIMOTHY J. BALL	5945 N. MAY BOISE, 1D
TODI B. BALL	11 11 11 11 11 83703
<ul> <li>3. The general type of business transacted under</li> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> <li>4. The name and address to which future correspondence should be addressed:</li> <li>ABOVE</li> <li>5. Name and address for this acknowledgment copy is (if other than #4 above):</li> </ul>	d Public Utilities Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
Signature: Printed Name: J · B ALL Capacity: (see instruction #8 on back of form)	Secretary of State use only         IDAHO SECRETARY OF STATE         12/12/2001       05:00         CK: 210 CT: 154555 BH: 434178         1 0 20.00 = 20.00 ASSUM NAME # 2