

CERTIFICATE OF ASSUMED BUSINESS NAME

2015 FEB -6 AM 8: 17

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

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Please type or print legibly. Instructions are included on back of application.

1.	The assumed business name which the unbusiness is:	dersigned use(s) in the transaction of
	Dat-sun construction	
2.	The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> Alfredo Algarin	, , , ,
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed: Alfredo Algarin 520 North Buchanan St jerome ID 83338	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above).	
		Secretary of State use only
Printe Capa Signa	ed Name: Alfredo Algarin 2/4/15 acity/Title: Owner ature:	10AHO SECRETARY OF STATE 02/06/2015 05:00 CK:22153240315 CT:158010 BH:14606 16 25:00 = 25:00 ASSUM NAME #2
Printe	ed Name:	1 1

Capacity/Title: