

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 28 AH 9: 24 submits for filing a certificate of Assumed Business-Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

Phillip Pratt Fiber Contractor	
The true name(s) and business address(es) o business under the assumed business name:	f the entity or individual(s) doing
Name	Complete Address
Phillip Pratt	P.O Box 85 Saint Charles, ID 83272
Candice Pratt	P.O Box 85 Saint Charles, ID 83272
The general type of business transacted under	
	nd Public Utilities
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
correspondence should be addressed: Phillip Pratt	700 West Jefferson Basement West PO Box 83720
P.O Box 85 Saint Charles, ID 83272	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-339-6642
	Secretary of State use only
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nature: Talliff	
ted Name: Phillip Pra++	berkeed 04/2003
	SECRETARY OF STATE
oacity/Title:	IDAHO SECRETARY OF STAT 08/29/2006 05: CK: 2645 CT: 158010 BH: 9 1 8 25.80 = 25.80 ASSIM N