

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-534, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name.

2007 AUG 15 AM 10:58

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

John the Handyman

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

John Anthony Haug
SANDRA GENE HAUG

4223 E. WOODLAND DR., POST FALLS, ID
4223 E. WOODLAND DR., 83854
POST FALLS, ID,
83854

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

John A. Haug
4223 E. WOODLAND DR.
Post Falls, ID, 83854

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-773-2722

Secretary of State use only

Signature:

John A. Haug
(signature required)

Printed Name:

John A. Haug

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
08/15/2007 05:00
CK: 1246185 CT: 172899 BH: 1070811
1 @ 25.00 = 25.00 ASSUM NAME # 2

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