

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

ALPINE ROOFING

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

Name	Address
CLAY HABERKAMP	PO BOX 367 SAGLE, ND 58386

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

3

See categories on the reverse

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

CLAY HABERKAMP PO BOX 367 SAGE ID 83860

Signed Clay Haberkamp

By _____

Capacity OWNER

**Submit Certificate of Assumed
Business Name and \$20.00 fee to:**

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 04/07/1997
0900 80034 2
CK #: 77024 CUST# 79370
ASSUM NAME 1@ 20.00= 20.00

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