

CERTIFICATE OF

FILED EFFECTIVE

ASSUMED BUSINESS NAME MAR 26 AM 10: 19
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name CRETARY OF STATE Please type or print legibly.

Please type or print legibly. NOTE: See instructions on reverse before filing.

The assumed business name which the under business is: West Const		ruse(s) in the transaction of	- Language
The true name(s) and business address(es) or business under the assumed business name: Name Darl K West		ntity or individual(s) doing Complete Address BOX 1235, Priest River, ID> 83856	N: N:
The general type of business transacted under Retail Trade			
5. Name and address for this acknowledgment copy is (if other than #4 above):			
Signature: (signature required) Printed Name: Darl K West Capacity/Title: owner (see instruction # 8 on back of form)	g toopitomstabn tomstabn.p65 Re-daed 042003	Secretary of State use only IDANO SECRETARY OF 9 03/26/2009 0 CK: 217893 CT: 178899 N	STATE 15 2 00

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