CERTIFICATE OF ASSUMED BUSINESS NAME

business is:	SECRETARY OF STATE STATE OF TOAHOR which the undersigned use(s) in the transaction of
Sawtooth Ang	ler
. The true name(s) and busines	ss address(es) of the entity or individual(s) doing
business under the assumed	, , , , , , , , , , , , , , , , , , ,
<u>Name</u>	<u>Address</u>
Max Christensen	2540 W. Roise Ave # 103 Boise Id 8
. The general type of business	transacted under the assumed business name is:
See categories on the reverse	
See categories on the reverse The name and address to whi	ich correspondence should be addressed:
See categories on the reverse The name and address to whi	ich correspondence should be addressed: Ave ** 103
See categories on the reverse The name and address to whi	ich correspondence should be addressed: Ave ** 103
See categories on the reverse The name and address to white 2540 w. Raise Submit Certificate of Assumed	Signed Max Christensen Customer # Customer # Correspondence should be addressed: Ave # 103 Boise Tdaha 85706 Signed Max Christensen Customer #
See categories on the reverse The name and address to white 2540 w. Raise	Signed Max Christensen Capacity Owner Sole Proprietor Customer # Secretary of State use only
See categories on the reverse The name and address to white	Signed Max Christensen Capacity Owner Sole Proprietor Customer # Secretary of State use only
See categories on the reverse The name and address to white 2540 w. Raise Submit Certificate of Assumed Business Name and \$20.00 fer Secretary of State 700 West Jefferson	Signed Max Christensen Capacity Owner Sole Proprietor Customer # Secretary of State use only
See categories on the reverse The name and address to white	Signed Max Christonsen Capacity Owner Sole Proprietor Customer # Secretary of State use only Signed Christonsen Capacity Owner Sole Proprietor



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application) APR -2 M 8: 34

SECRETARY OF STATE STATE OF DAME The undersigned partnership hereby files a statement of partnership authority, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-303.							
1. The name of the partnership is:	inard Engineering		· · · · · · · · · · · · · · · · · · ·				
2. The street address of its chief exe							
3. The street address of one (1) office							
4. The names and mailing addresses		s (attached she			- FIEE		
Name	Address 🤗 🗟						
Paul Pinard	PO Box 871347, Wasilla, AK 99687				= 1		
Jim Fullmer	4857 W. Sheila Lane #102, Boise, ID 83705						
OR the name and address of the restaurant of the partners authorized bald in the name of the name			transferring	STATE real prop	AM 9: 11		
held in the name of the partnership: Paul Pinard							
6. Signature of at least 2 partners: 1) Typed Name Paul E. Pinard 2) Typed Name James R. Fullmer		pilormalgaformapauth.p65 Revised 01/2001	Secretary of State	e use only			
3) Typed Name		Revised	07/03/	CRETARY OF (2002 9 : 161649 14	TATE 5 = 80 1: 475317		

K V3

600 SOUTH ORCHARD, SUITE A BOISE, IDAHO 83705 (208) 334-3860

June 20, 2002

Pinard Engineering 4857 Sheila St., #102 Boise, ID 83705

ATTENTION: President, Pinard Engineering

Dear Mr/Ms President:

Your application for a Certificate of Authorization to practice professional engineering through your business entity in Idaho was reviewed and approved. Enclosed you will find a Certificate of Authorization for Pinard Engineering Your application and certificate covers the period through July 31, 2003. A notice of renewal will be sent to you approximately thirty days prior to the renewal date (August 1, 2003).

We call your attention to Section 54-1235, Idaho Code (Practice by a Business Entity) of the Engineering and Land Surveying Law, which provides that the business entity must keep the Board advised of changes in professional engineers who will have responsible charge of professional engineering work done in Idaho.

If you have not already done so, you may be required to file for a Certificate of Authority with the Secretary of State's office. They can be contacted at (208) 334-2301 for further information.

Sincerely yours,

Linda A. Bowcutt

Administrative Secretary

Finde a. Bowcout

Enclosure:

Certificate of Authorization

cc:

Secretary of State's Office Attn: Mark Stephensen