

CERTIFICATE OF ASSUMED BUSINESS NAME

F. FECTIVE

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

2003 JUN 19 AM 8:58

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

NOTE: See instructions on reverse before	filing.
	STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of	
huninggo is:	_
Five Step (a	rpet (are
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing	
business under the assumed business name:	
Name	Complete Address
Odry W. Pire	P.O. Box 974 Hailey, Idaho, 83333
	Mailly, Loano, 03335
	and the annumed hypinose name is:
3. The general type of business transacted und	er the assumed business hame is.
□	and Public Utilities
	and rubile cultiles
Wholesale Trade Construction	
Services	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
	Secretary of State
4. The name and address to which future	700 West Jefferson
correspondence should be addressed:	Basement West
P.O. Box 474	PO Box 83720
Hailer Indaha	Boise ID 83720-0080
B3333	208 334-2301
Name and address for this acknowledgmen	nt Phone number (optional):
copy is (if other than # 4 above).	208-788.8410
£ ~ (AL)	
	Secretary of State use only
	Opportunity of Cauto acc city
	D66473
X N-V.V	
Signature: (signature required)	IDAHO SECRETARY OF STATE
Printed Name: Jary W. Pike	IDAHO SECRETARY OF STATE OG/19/2003 05 = 00 CK: 1884 CT: 158818 BH: 686875 1 8 25.88 = 25.88 ASSUM NAME # 2
	1 9 25.08 = 25.88 ASSUM NAME # 2
Capacity/Title: Manager	يما