

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2004 MAR 31 PM 2: 24

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of	
1	Construction
2. The true name(s) and <u>business</u> address(es) of the enbusiness under the assumed business name: Name Bert W. Harrington 1608 Name Darla S. Harrington 1608 Name	Complete Address V Post, Post Falls Id 83854 V Post Post Talls Id 83854
3. The general type of business transacted under the assumed business name is:	
Retail Trade	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 Phone number (optional):
	Secretary of State use only
Signature: Signature required) Printed Name: Bert Harring ton Capacity/Title: OWNEY	IDAHO SECRETARY OF STATE 03/31/2004 05:00 CK: 71561 CT: 158010 BH: 736643 1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title: <u>owner</u>	