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. 2006 APR 21 AM 9: 39

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

SECRETARY OF STATE

NOTE: See instructions on reverse before filin	g.	STATE OF IDATIO
1. The assumed business name which the undersign business is: <u>Chapman Construct</u>	ned ι	use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Gail F. Chapman P.O.	ne eni	tity or individual(s) doing
3. The general type of business transacted under the assumed business name is:		
Retail Trade Wholesale Trade Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Chapman Construction Co. Gail Fi Chapman Po. Boy 234 White Bird Jd 835		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
5. Name and address for this acknowledgment copy is (if other than # 4 above):	,	Phone number (optional):
		Secretary of State use only
Signature: (signature required) Printed Name: Gail F. Chapman Capacity/Title: Owner (see instruction # 8 on back of form)	g:\corp\forms\abn p65 Revised 04/2003	IDAHO SECRETARY OF STATE 94/21/2006 05:00 CK: 97 CT: 158010 BH: 950518 1 8 25.00 = 25.00 ASSUM NAME # 2