



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2017 DEC 11 AM 9:20

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

STORMRIDER CONSTRUCTION

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Don Cummings

19 Stormrider Rd Salmon, ID 83467

Phone 208-993-3540

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade
☐ Wholesale Trade
☒ Services

☒ Construction
☐ Agriculture
☒ Manufacturing

☐ Transportation and Public Utilities
☐ Mining
☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

19 Stormrider Road
Salmon, ID, 83467

5. Name and address for this acknowledgment copy is (if other than # 4):

Printed Name: _____

Signature: Don Cummings

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/11/2017 05:00

CK:1701 CT:349514 BH:1615660
1@ 25.00 = 25.00 ASSUM NAME #2

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