

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

09 JUL 10 AM 9: 08

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

The assumed business name which the unders business is:	
BEACHY BUIL	.DINGS
. The true name(s) and business address(es) of business under the assumed business name: Name	the entity or individual(s) doing Complete Address
PHILLIP RAY BEACHY	1506 BLUE SKY ROAD
	BONNERS FERRY, ID 83805
. The general type of business transacted under	the assumed business name is:
Retail Trade Transportation and	d Public Utilities
 Wholesale Trade ✓ Construction Services Manufacturing Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and Calendary
. The name and address to which future correspondence should be addressed: 1506 Blue Sky Road	450 N 4th Street PO Box 83720 Boise ID 83720-0080
Benners Ferry ID 83805	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	
STOCKTON BUSINESS SERVICES	
PO BOX 3084	Secretary of State use only
BONNERS FERRY, ID 83805	
ted Name:PHILLIP RAY BEACHY pacity/Title:OWNER	IDAHO SECRETARY OF STATE 07/10/2009 05:0
ted Name: PHILLIP RAY BEACHY	IDANO SECRETARY OF STATE 87/10/2009 05:0
acity/Title:	CK: 6187 CT: 238798 BH: 1178; 1 0 25.00 = 25.00 ASSUM HANK

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