## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) AR 19 PM 2: 30 To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: Klizzard CONSTRUCTION 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Delbridge 1021 E BONNEVIlle , POCAtello ID, 83201 Nake HUNTSMANI Mike 704M SPring VAILL 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 208 4. The name and address to which future 478-2650 Phone number (optional): correspondence should be addressed: Kichard Delbridge Submit Certificate of **Assumed Business** 1021 E BONNEUIlle Name and \$20.00 fee to: Pocatello ID, 83a01 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only

IDAHO SECRETARY OF STATE

83/20/2001 09:00 CK: 1818 CT: 143842 BH: 385786

26.08 = 29.00 ASSUM NAME # 2

143689

Signature: Printed Name:

Capacity: General

(see instruction # 8 on back of form)