Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

. . .

FILED EFFECTIVE

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

Filing fee: \$25.00.

2015 OCT -1 AM 8: 46

	Filling lee, \$25.0	U .			SECRETARY	FSTATE
1.	The assumed business nan	ne which the undersig	ned i	use(s) in the transac	CVI N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$ > \$4.775 \$
	Spring Fever Excavation					
					· · · · · · · · · · · · · · · · · · ·	
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):					
	Wade A Melton	405 106th Orofino, ID 83544				
	(Name)	(Address)				
	(Name)	(Address)				
	(Name)	(Address)				
	(Name)	(Address)	<u> </u>			
4.	Retail Trade Wholesale Trade Services Mailing address for future c Wade A Melton (Name) 405 106th St (Address) Orofino, ID 83544 (City) (S	Construction Agriculture Manufacturing orrespondence:		Mining		eal Estate
Printed Name: Wade A Melton Signature: Wady A - Mut Printed Name:				Secretary of State use only IDAHO SECRETARY OF STATE 10/01/2015 05:00 CK:214969 CT:315181 BH:1494538 16 25.00 = 25.00 ASSUM NAME #2		
Pr	inted Name:			C 101	719	
Cianatura				D181769		

Rev. 08/2015