| 27   |   |                             |   |            |            |
|--|---|-----------------------------|---|------------|------------|
|  | CERTIFICATE OF ASSUM (Please type or print legibly. Se  To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idaho                                  | e instruction<br>E OF IDAHC | ns on reverse.)                                     | ME OD APR  | FILED      |
|  | gives notice of adoption of an Ass  |                             | •   | ATE        | m          |
| 1.   | The assumed business name which the und business is:  | ersigned use                | e(s) in the trans                                   | = ₹        | D/EFFECTIV |
|  | TREASURE VALLEY CONFROTE  | ENGKA                       | V1W9  | A 등 약      | ့ ဂ        |
| 2.   | The true name(s) and business address(es) business under the assumed business name  | of the entity               | <u>†</u>  | doing      | TIVE       |
|  | Name  | <del></del>                 | nplete Address                                      | ,          |            |
|  |   | 1228 50                     | M dd leTun 1  | ed Nang    | gld.       |
|  | MICHHEL D. ALCORN   |                             |   |            | <b>-</b>   |
| 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 |                             |   |            |            |
| The name and address to which future Phone number (optional):  correspondence should be addressed: |   |                             |   |            | -          |
|  | TRANSURY VALLEY CONCRETE FAGRAV   | Ing                         | Submit Certifica<br>Assumed Busin<br>Name and \$20. | ess        |            |
|  | NAMPA 1d 83686  |                             | Secretary of Sta                                    | S.Ø<br>ate |            |

5. Name and address for this acknowledgment COPY IS (if other than # 4 above):

700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301

Secretary of State use only STATE

04/21/2000 09:00 CK: NO CK # CT: 1380% BH: 311201

1 8 20.06 = 28.06 ASSUM NAME # 2

D 35207

Signature: Frank Woods

Printed Name: FRANK AlroRN

Capacity: <u>Owner</u> .

(see instruction # 8 on back of form)