CERTIFICATE OF ASSUMED E (Please type or print legibly. See instru	ctions on reverse.)
To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Names TATE OF IDAHO  OF JUNITARIA SE LA COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DEL COMPANIO DEL COMPANIO DE LA COMPANIO DE LA COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DEL COMPANIO DE LA COMPANIO DE LA COMPANIO DE LA COMPANIO DEL C	
<ol> <li>The assumed business name which the u business is:</li> </ol>	ndersigned use(s) in the transaction of
Ralphj M. Mitchell Construction	
The true name(s) and business address(e business under the assumed business name to business address(e business address).	me is/are:
Name Ralph Mitchell P.O. Box 102	<u>Complete Address</u> 26 Burley, Idaho 83318
Raipii Mitchell P.O. Box 102	26 Burley, Idaho 83318
The general type of business transacted unique (mark only those that apply)	under the assumed business name is:
Retail Trade X Manufacturin  X Wholesale Trade Agriculture  X Services X Construction	Finance, Insurance, and Real Estat
4. The name and address to which future correspondence should be addressed:	Phone number (optional): 208 678 4118
Ralph Mitchell	Submit Certificate of
P.O. Box 1026	Assumed Business Name and <b>\$20.00</b> fee to:
Burley, Idaho 83318	Secretary of State
5. Name and address for this acknowledgme copy is (if other than # 4 above):	700 West Jefferson
	Secretary of State use only IDAHO SECRETARY OF STATE
	06/14/2006 09:00 CK: 6156 CT: 132372 BH: 326132
Signature: John M. M. Malala Co	1 8 28.88 = 28.88 ASSUM NAME # 2
Printed Name: Ralph M. Mitchell	i.pmd
Capacity: Ousur	D 3 6 2 8
(see instruction # 8 on back of form)	D 3 6 8 8