Capacity:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO FILED/EFFE TIVE Pursuant to Section 53-504, Idaho Code, the undersigned AM 10: 21 gives notice of adoption of an Assumed Business Name of STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: SHIPLEY WELDING 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address ANTHONY SHIPLEY 1217 S. 2600 W ABERDEEN 1D 83210 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 4. The name and address to which future 221-Phone number (optional): 208 3 3 057 correspondence should be addressed: SHIPLEY WELDING Submit Certificate of Assumed Business 1217 S. 2600 W Name and \$20.00 fee to: ABERDEEN, 10 83210 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** COPY 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 92/13/20D1 09:00 CK: 7644 CT: 142|54 BH: 378419 28.00 = 20.00 ASSUM HAME # 2 Printed Name: ANTHONY SHIPLEY

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