

Capacity/Title: Owner

CERTIFICATE OF ASSUMED BUSINESS NAME

10 AUG -9 AM 9: 03

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

	ER Seagra	ves Construc	etion
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address		
	Eric S. Seagraves	281 Reinoehl Road Kingston ID 83839 281 Reinoehl Road Kingston ID 83839	
	Rhonda R. Seagraves		
3.	The general type of business transacted u		
	 Retail Trade Wholesale Trade ✓ Construction Services Manufacturing Finance, Insurance, and Real Estate)	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Eric S. Seagraves PO Box 439 Kingston ID 83839		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above).	ent	
	iture: Dagruge		Secretary of State use only
inte	ed Name: Eric S. Seagraves		
pa	city/Title: Owner]	
yna	iture:	′	IDAHO SECRETARY OF STATE 08/09/2010 05:00
_	ed Name: Rhonda R. Seagraves		CK: 6131 CT: 187620 BH: 123394 1 @ 25.00 = 25.00 ASSUM NAME

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abn.pmd Rev. 07/2010