Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 DEC -1 AM 8:21

Please type or print legibly.

Instructions are included on back of application.

SECRE ARY OF STATE STATE OF IDAHO

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The assumed business name which the undersigned	ed use(s) in the transaction of
business is:	
Edgeline Construction	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name David Abraham Croy 1100	entity or individual(s) doing Complete Address Complete Address Complete Address Complete Address Complete Address
3. The general type of business transacted under the Retail Trade Transportation and Pu Wholesale Trade Agriculture	
☐ Manufacturing ☐ Mining ☐ 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: David A. Carry	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
Magherat, Id. 83864	208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
Signature: h	
Printed Name: David A Cray	
Capacity/Title: Owner	IDAHO SECRETARY OF STATE
Signature:	12/01/2016 03:00 09: 17369649A41 CT: 158010 BH: 124894
Printed Name	1 0 25.80 = 25.80 ASSUM NAME # 2