

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

08 SEP 23 PH 2: 49

SECRETARY OF STATE STATE OF IDAHO

BARFLY CONTR	CABAND
The true name(s) and business address business under the assumed business n	name:
Name	Complete Address
CRAIG A. MILSTEAD	3005 TAMARACK DR.
	BOISE, 2D 83703
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta  4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business
CRAIG A. MILSTEAD  3005 TAMARACK DR.  BOISE ID 83403	(208) 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	ment
ignature:	Secretary of State use only
(signalure required)	HZ2002
rinted Name: CRAIG A. MILSTEAD	- LE SECONDO LE CONTROL L'AND