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. 1. The assumed business name which the undersigned use(s) in the transaction of 0 STATE	
TC Handyman Service	
2. The true name(s) and business address(es business under the assumed business nam Name Clinton D. Langston Tamera A. Langston	
 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: TC Handyman Service 3800 Normandie Dr. Boise, Idaho 83705 	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme COPY IS (if other than # 4 above). 	nt Phone number (optional): (208)412-5621
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 07/25/2005 05 = 00 CK: 3736 CT: 150010 BH: 623114 1 9 25.00 = 25.00 ASSUM NAME # 6

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