

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2006 APR 24 AM 10:05

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Top Notch Construction

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Zoltan S Kiss

2215 W Hwy 53 Spc 5 Rathdrum, ID 83858

Jeremiah W Skaggs

5274 Hedgewood St Post Falls, ID 83854

Joshua A Cuberos

5274 Hedgewood St Post Falls, ID 83854

BRANDON K. COREY

5636 N. PACIFIC AVE. COUR D'ALENE ID 83815

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Top Notch Construction

2215 W Hwy 53 Spc

Rathdrum, ID 83858

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

Signature: _____

Printed Name: _____

Capacity/Title: _____

(Signature required)

Zoltan S Kiss

Partner

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE
04/24/2006 05:00
CK: 48110476304 CT: 199527 BH: 950787
1 @ 25.00 = 25.00 ASSUM NAME # 2

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