CERTIFICATE OF ASSUMED I (Please type or print legibly. See instru			
To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Cogives notice of adoption of an Assume	FIDAHO gg node, the under ed Busings	FILE Sighed PM 2: 17 James OF STAT	D
The assumed business name which the updates is:	undersign ed û	SE(S) in the trans	saction of
KARSTEN HOMES OF IDANG	DIV. C	OF CONSTRU	KTION
The true name(s) and business address(s) business under the assumed business name(s).	•	ty or individual(s) doing
Name	Complete Address		
KUSSELL E STAPHES	11543 MOSS LN NPMPA 83651		
JOHN HARUKINS	<u> </u>	Х	11
GIBERT WISON	3^	11	11
The general type of business transacted under the assumed business name is: (mark only those that apply)			
Retail Trade			
 The name and address to which future correspondence should be addressed: 	Phone number	er (optional):	!
KUSSELL E STARNES		Submit Certific Assumed Busi Name and \$20	ness
MAMPA 20 83651	•	Secretary of S	tate
Name and address for this acknowledgme copy is (if other than # 4 above):	ent	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
		Secretary of Sta	te use only
	n 2/87	IDAHO SECRETARY O	F STATE
Signature: Russel & Starry	Revision 2/87	10/19/1999 CK: none CT: 121926	9 09:00
Printed Name: RUSSELL E STARNES	9	1 8 28.88 = 29.88	ASSUM NAME # 2
Capacity: GENERAL PARTIER (see instruction # 8 on back of form)	corpMorms\above, pm6	D301	05
-	18		