

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 1 JUN 25 AH $\,6:36$ submits for filling a certificate of Assumed Business Name.

Please type or print legibly.

CEUMPTER LUT STATE

NOIE: See instructions on reverse be	ofore filing. STATE OF IDAHO
1. The assumed business name which the u	undersigned use(s) in the transaction of
Hagerman Express S	Stop
2. The true name(s) and <u>business</u> address(estimates) and <u>business</u> address name	es) of the entity or individual(s) doing me:
Name	Complete Address
→ HKL, L.L.C. (ω) 15741	361 S. State Hagerman, ID 83332
Wholesale Trade Construction	on and Public Utilities
☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Hagerman Express Stop	PO Box 83720
P.O. Box 514	Boise ID 83720-0080
Hagerman, ID 83332	208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above): 	nent Phone number (optional):
	<u>(208) 837-6154</u>
	Secretary of State use only
gnature: Thank house	IDAHO SECRETARY OF STATE 97/17/2001 05:20 CK: 215 CT: 148876 BH: 48813
rinted Name:	Thain ceantany as assume
apacity: <u>Member</u>	IDANO SECRETARY OF STATE 07/17/2001 05:00
(see instruction # 8 on back of form)	CK: 215 CT: 148876 BH: 488138

20.00 = 20.00 ASSUM NAME # 2

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