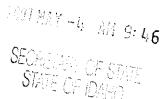


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



	e undersigned use(s) in the transaction of	
business is: North West Contraction	nq	
2. The true name(s) and business address business under the assumed business Name Rangy Mikel S		, <u>ID83</u> 835
	ation and Public Utilities	
 Wholesale Trade ✓ Services ✓ Agriculture Manufacturing ✓ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business	
4. The name and address to which future correspondence should be addressed: Randy Mikels 11639 E. Worthwood Dr. Hayden Lake, Tooth 8383	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowled copy is (if other than # 4 above).		J
	Secretary of State use only	
ignature: Rondy Nikola (signature required)	Sed under the secretary Se	111
rinted Name: Randy Mikels	LDAHO SECRETARY	
apacity/Title: <u>Dunce</u> (see instruction # 8 on back of form)	CK: 1459 CT: 158816	