CERTIFICATE OF ASSUMED BUSINESS NAME



Pursuant to Section 53-504, Idaho Code, the undersigned DEC -6 NECC 50 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

STATE OF THEME

NOTE: See instructions on reverse bet	ore filing.	STATE OF REMIND	
1. The assumed business name which the u business is: Construction	ndersigned u	se(s) in the transaction of	-
2. The true name(s) and business address(e business under the assumed business na Name John Gleese TL			
3. The general type of business transacted to	inder the ass	umed business name is:	
Wholesale Trade Construction	on and Public	Utilities	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat	e	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
The name and address to which future correspondence should be addressed: John Gleese III		Secretary of State 700 West Jefferson Basement West PO Box 83720	
105 codinacion est Ro		Boise ID 83720-0080 208 334-2301	
Digachures TS 83801	-	Phone number (optional):	
Name and address for this acknowledged copy is (if other than # 4 above):	ient '	308 457-3663	
		Secretary of State use only	
Signature (signature required) Printed Name: John T. Gleere 11 Capacity/Title: Owner (see instruction # 8 on back of form)	g:\corp\forms\abn forms\abn.p65 Revised 04/2003	IDANO SECRETARY OF STATE 12/06/2004 05: CK: 7729 CT: 158010 BH: 77 1 0 25.00 = 25.00 ASSUM NA	: 00 19978 WE # 2
(COO		D 8247	8