# State of Idaho

Office of the Secretary of State

# OF ALLIANCE EXCAVATION INC

#### File Number C 199171

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: July 25, 2013



Ben youra SECRETARY OF STATE

By July



## **APPLICATION FOR CERTIFICATE** OF AUTHORITY (For Profit) (Instructions on Back of Application)

2013 JUL 25 AM 9: 24

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The undersigned Corporation applies for a Certificate of Authority and states as follows:	
1.	The name of the corporation is:
	ALLIANCE EXCAVATION INC
2.	The name which it shall use in Idaho is: ALIANCE EXCAVATION INC
3.	It is incorporated under the laws of: WASHINGTON STATE
4.	Its date of incorporation is: $\frac{10}{21}$
5.	The address of its principal office is:  5307 E. CATALDO AVE SPOKANE, WA 99312
6.	The address to which correspondence should be addressed, if different from item 5, is:  (SEE PRINCIPAL OFFICE ADDRESS)
7.	The street address of its registered office in Idaho is:, 105 9, 67th, 67E.A COCUT d'ALENE, ID 838H
	and its registered agent in Idaho at that address is: All DAY \$49 IDAHO REGISTERED AGENT
8.	The names and respective business addresses of its directors and officers are:
	Name Title Business Address
	SKYLER CARLILE PRESIDENT 5307 E. CATALDO AVE.
	<del>-</del>
Dat	red: 7/18/13 Customer Acct #:
Sig	Secretary of State use only
Гур	ped Name: SYVER CARLIE  Deacity: PRESIDENT  [The signer must be a director or an officer of the corporation.]  The signer must be a director or an officer of the corporation.]  The signer must be a director or an officer of the corporation.]  The signer must be a director or an officer of the corporation.]
Cap	Decity: PRESIDENT Decity: 1998.99 AUTH PRO # 2
•	[The signer must be a director or an officer of the corporation.]



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

## CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

### **ALLIANCE EXCAVATION INC**

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 10/21/2010.

I FURTHER CERTIFY that as of the date of this certificate, ALLIANCE EXCAVATION INC remains active and has complied with the filing requirements of this office.

Date: July 19, 2013

UBI: 603-057-944

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Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State