



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name. REV 9: 09

Please type or print legibly.

NOTE: See instructions on reverse before filing. STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Got Dirt Excavation

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>Josh Smith</u>	<u>32782 N. 4th AVE Spirit Lake ID</u>
<u>Crystal Smith</u>	<u>32782 N. 4th AVE Spirit Lake ID 83869</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Josh or Crystal Smith
P.O. Box 1211
Spirit Lake ID 83869

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

(208) 623-2445

Secretary of State use only

D 82550

IDAHO SECRETARY OF STATE
12/10/2004 05:00
CK: NO CK # CT: 158010 BH: 788844
1 @ 25.00 = 25.00 ASSUM NAME # 2

Signature:

Crystal Smith
(signature required)

Printed Name:

Crystal Smith

Capacity/Title:

Owner

(see instruction # 8 on back of form)