CERTIFICATE OF ASSUMED BUSINESS NAME

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

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transactions is:

2. The true name(s) and business address(es) or business under the assumed business name: Name Foliando Tursez	Complete Address 2777 N.W. 12 St Meridian, FD 836
3. The general type of business transacted unde ☐ Retail Trade ☐ Transportation ar ☐ Wholesale Trade ☑ Construction	er the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25,00 fee to:
4. The name and address to which future correspondence should be addressed: 2777 N.W. 13 St marking 10, 93642	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional): 208 - 871 - 7845
	Secretary of State use only
Signature: Palando (algregotivo required) Printed Name: Polando Tuarez Capacity/Title: Gwner	identification of the state of
Capacity/Title: 6wner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 96/19/2006 05:00 CK: 834759 CT: 172899 BH: 968813 1 8 25.00 = 25.00 ASSUM NAME # 2