

## **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.

| uaucaa 18                                      | The assumed business name which the undersigned use(s) in the transaction of business is: |  |
|--|---|--|
| Energy Built Homes                             |   |  |
|  |   |  |
| The true name(s) and business address(es) of   | the entity or individual(s) doing   |  |
| business under the assumed business name:      | Complete Address  |  |
| Name   | Complete Address  |  |
| David K Menzel 85                              | 537 W. Fairview Ave, Apt.207 Boise, ID 83704  |  |
| Kolby D Johnson                                | 2307 E. Franklin Rd. Meridian, ID 83642   |  |
|  |   |  |
| The general type of business transacted under  | the assumed husiness name is:   |  |
| The deneral rate of promises frameworker ander | are accurred backlood frame is.   |  |
| Retail Trade Transportation an                 | d Public Utilities  |  |
| Wholesale Trade ✓ Construction                 |   |  |
| Services Agriculture                           | Submit Certificate of   |  |
| Manufacturing Mining                           | Assumed Business  |  |
|  | Name and \$25.00 fee to:  |  |
| Finance, Insurance, and Real Estate            |   |  |
| The name and address to which future           | Secretary of State  |  |
| correspondence should be addressed:            | 700 West Jefferson  |  |
| Kalbu D. Jahnaan                               | Basement West PO Box 83720  |  |
| Kolby D Johnson                                | Boise ID 83720-0080   |  |
| 2307 East Franklin Rd.                         | 208 334-2301  |  |
| Meridian, ID 83642                             |   |  |
| Name and address for this acknowledgment       | Phone number (optional):  |  |
| CODY IS (if other than # 4 above):             |   |  |
| <b></b>  |   |  |
|  | Secretary of State use only   |  |
| l l  | getterany of state time only  |  |
|  |   |  |
| <u> </u>                                       | <u>6</u>  |  |
| and Market Min                                 | ood com   |  |
| ature: Molly Min. Kaignature required)         | COCI-   |  |
| ed Name: Kolby D Johnson                       | read 04/2003  |  |
| ed Name:                                       | CONTROL OF ST   |  |

CK: 4583 CT: 137384 BH: 921065 1 0 25.00 = 25.00 ASSUM NAME # 2

