

Capacity/Title: OWKEN

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

SECRETARY OF STATE STATE

STATE OF IDAHO

05 OCT 17 PM 4: 28

NOTE: See instructions on reverse before filing.

 The assumed business name which the undersign business is: 	
LARKIN HALL & ASSO	CIATES
The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	e entity or individual(s) doing
<u>Name</u>	Complete Address
(CHIMM L. HALL PO	BUX 1533
	CISE Idaho
	83761
3. The general type of business transacted under the	e assumed business name is:
Retail Trade Transportation and Pour Wholesale Trade Construction	ublic Utilities
Services	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
☐ Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
PUBEX 1533 Bust Idaho	PO Box 83720
RCISE Idabo	Boise ID 83720-0080
£3701	208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):
	Secretary of State use only
ignature: Manus June (signature required) rinted Name VIII My L. Hyuu	TRAND OFFICERDY OF STATE
rinted Name //// My L. H4LL see 500 27 20 20 20 20 20 20 20 20 20 20 20 20 20	IDAHO SECRETARY OF STATE 10/18/2005 05:00 CK: 124 CT: 158010 BH: 917429

IDAHO SECRETARY OF STATE

10/18/2005 05:00

CK: 124 CT: 158010 BH: 917429

1 0 25.00 = 25.00 ASSUM NAME # 2

92715