CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.



1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	Cascade Builders	
2.		or individual(s) doing nplete Address St., Boise, ID 83702
3.	The general type of business transacted under the assur (mark only those that apply)	med business name is:
	☐ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilities ☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate ☐ Services ☒☒ Construction ☐ Mining	
4.	. The name and address to which future Phone number (optional): correspondence should be addressed:	
	2675 West Main Street	
		Submit Certificate of Assumed Business
	Roise, Idaho 83702	Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above): Bert L. Poole 1609 W. State St. Boi. ID 83702	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	1609 W. State St., Boi, ID 83702	Secretary of State use only

IDANO SECRETARY OF STATE
DATE 03/17/1997
0900 73666 2
CX #: 1363 CUST# 78301
ASSUM NAME 10 20.00= 20.00

Signature: William B. Cararelli
Capacity: Sole owner

(see instruction # 8 on back of form)

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