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(see instruction # 8 on back of form)



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE 01 SEP-7 AM 8:41 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly NOTE: See instructions on reverse before filing.

business is: <u>Renovations</u> By Johnso	n s
2. The true name(s) and business address(es) of business under the assumed business name: Name Bette Johnson Terry S Johnson	the entity or individual(s) doing Complete Address PO Box 204 Hansen, ID 8333 436 Wilson Rd Kimber ID 83341
Wholesale Trade X Construction	er the assumed business name is:
ServicesManufacturingMiningFinance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Bette Johnson FO Box 204 Hansen Idaho 83334	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):
	Secretary of State use only
Signature: <u>Sette</u> Jehnson Printed Name: <u>Bette Johnson</u> Capacity: <u>Cwner</u>	IDAHO SECRETARY OF STATE 09/67/2001 05:00 CK: 411 CT: 141619 BH: 417913 1 8 20.00 = 20.00 ASSUM HAME # 2