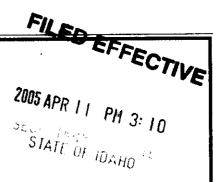


## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



D&D A	ssociates
The true name(s) and business address(es business under the assumed business name	s) of the entity or individual(s) doing ne: Complete Address
Dawn Marie Freeman	2687 Metallic Ct. Athol, Idaho 83801
John David Freeman	2687 Metallic Ct. Athol, Idaho 83801
The general type of business transacted ur  Retail Trade Transportation  Wholesale Trade Construction	nder the assumed business name is:
✓ Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:  D&D Associates	Secretary of State 700 West Jefferson Basement West PO Box 83720
2687 Metallic Ct.	Boise ID 83720-0080 208 334-2301
Athol, Idaho 83801  Name and address for this acknowledgme copy is (if other than # 4 above):  same as above	ent Phone number (optional):  208-772-6858
	Secretary of State use only
ture: (signature/required)  ed Name: Dawn Marie Freeman  city/Title: Owner  (see instruction # 8 on back of form)	1DAHO SECRETARY OF STA  94/12/2005 05  CK: 1876 CT: 158010 BH:

D86613