## I

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY ARE	uctions on reverse.)
To the SECRETARY OF STATE, STATE OF II	DAHO
Pursuant to Section 53-504, Idaho Code gives notice of adoption of an Assumed	the undersigned Business Name. 106 Business Name. 1
The assumed business name which the understand	Business Name:
The assumed business name which the undersigned business is:	ed use(s) in the transaction of
HOKOM CONSTRU	STATE OF ISLAND
CONSIRU	<u> </u>
The true name(s) and business address(es) of the e business under the assumed business name information.	entity or individual(s) doing
business under the assumed business name is/are:	ritity or individual(s) doing
Name	Complete Address
John W Hokom 19150	Birchwood Dr. CALD. ID 8360
PEGGY J HOKOM 19150	B: La 10 C 10 1
11130	Birchwood Dr. CALD, IN 83607
<ol> <li>The general type of business transacted under the as (mark only those that apply)</li> </ol>	Coursed hours
(mark only those that apply)	ssumed business name is:
Retail Trade Manufacturing	
Wholesale Trade Arriv 1	Transportation and Public Utilities
Services S Constant	Finance, Insurance, and Real Estate
	Mining
4. The name and address to which future Phone num	ber (optional):
	(optional).
John W Hokom	Ta
19150 Birchwood Or. 83607	Submit Certificate of Assumed Business
	Name and \$20.00 fee to:
CALDWELL ID. 83607	
,	Secretary of State
5. Name and address for this acknowledgment	700 West Jefferson Basement West
COpy is (if other than # 4 above):	PO Box 83720
ATM: Past	Boise ID 83720-0080
10, Bx 1215	208 334-2301
Coldwell 10 vari	Secretary of State use only
- 8360b - 87 F	-

IDAHO SECRETARY OF STATE

01/30/2001 09:00 CK: 998 CT: 141554 BH: 375799

1 @ 20.00 = 20.00 ASSUM NAME # 2

D-2229

Revision 2.12.1

Signature: Hokom Printed Name:

Capacity: 💍

(see instruction # 8 on back of form)