



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

2012 JUL -9 AM 9:54

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of
~~business is:~~

Quality Construction Wagoner

2. The true name(s) and business address(es) of the entity or individual(s) doing
business under the assumed business name:

Name

Complete Address

Michael W. Wagoner

PO Box 3237, Hayden, ID 83835

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future
correspondence should be addressed:

Michael W. Wagoner

PO Box 3237

Hayden, ID 83835

5. Name and address for this acknowledgment
copy is (if other than # 4 above):

Signature: Michael W. Wagoner

Printed Name: Michael W. Wagoner

Capacity/Title: owner/operator

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
07/09/2012 05:00
CK: 2069 CT: 150010 BH: 1331313
1 @ 25.00 = 25.00 ASSUM NAME # 2

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