CERTIFICATE OF ASSUMED BUSINESS NAME

Capacity/Title: CO-OWNER

(see instruction # 8 on back of form)

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned MAR 14 PM 12: 52 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

STATE OF IDAHO

NOTE: See instructions on reverse before filing.

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The assumed business name which the undersigned usiness is: Pro Cote Asphalt Pavin	
2. The true name(s) and business address(es) of the entition business under the assumed business name: Name Charles Lynn Joles Tr. 510 Linda Joles 510 E	tity or individual(s) doing
3. The general type of business transacted under the as	ssumed business name is:
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Charles or hinds Jokes Jr. 510 E 17th St #121 TO FALLS TD 83404 5. Name and address for this acknowledgment	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
copy is (if other than # 4 above):	208-223-4038
Signature: Charles Jales Je Son De So	Secretary of State use only
Printed Name: Charles Joles JR.	

IDANO SECRETARY OF STATE

@3/15/2005 @5:00

CK: 7988559964 CT: 158010 BH: 798528
1 0 25.00 = 25.00 ASSUM NAME 8 2

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