

(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.

2004 DEC 13 Att Con-

Please type or print legibly. NOTE: See instructions on reverse before filing.	
NUTE: See Bistructions on reverse belote in	STATE OF 102.HO
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
I Wail It Constructi	IOA
2. The true name(s) and business address(es) of business under the assumed business name: Name David Serrano S	the entity or individual(s) doing Complete Address Ob Washing tonst. Box 313 Smeltorville Id 83868
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
correspondence should be addressed: LO. Box 313 Smatter ville Td. 83868	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): 208 512-0393
Smeltarvilla 2d. 83868	Secretary of State use only
Signature: (signature required)	IDAHO SECRETARY OF STATE 12/13/2004 05:00 CK: 8227256115 CT: 158010 BH: 7811 1 2 5.00 = 25.00 ASSIM MADRE #
Printed Name: David Serrano	IDAHO SECRETARY OF STATE 12/13/2004 05:00 CK: 8227256115 CT: 158818
Capacity/Title: Owner	CK: 8227256115 CT: 158010 BH: 7811