

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

Aug 6 4 04 PM 01

SECRETARY OF TAME
STATE OF TRAHE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned business is: CB's Defail	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name: Name Standard	ntity or individual(s) doing Complete Address Schinden Blud Min City ID 83714
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Construction Mining	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
CODY IS (if other than # 4 above):	
Some as ## 7	Secretary of State use only
Signature: Signature: Aylworth Capacity: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10 10 10 10 10 10 10 1

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