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

	(Please type or print legibly. See instructions on reverse.)			
1 4 6	To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.			
1.	The assumed business name which the undersigned use(s) in the transaction of business is:			
	DICKERSON CONSTRUCTION		-	
2.		ne true name(s) and business address(es) of the entity or individual(s) doing usiness under the assumed business name is/are:		
	Name STEVE DICKERSON 2		Iplete Address Tombo Faces, ID 8340/	
3.	ne general type of business transacted under the assumed business name is: (mark only those that apply)			
	☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ✗ Construction		nsportation and Public Utilities ance, Insurance, and Real Estate ing	
4.	he name and address to which future Phone number (optional): 208/5 22 -2/93 prrespondence should be addressed:			
	275 5th 55.		Submit Certificate of Assumed Business Name and \$20.00 fee to:	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	984		Secretary of State use only IDAHO SECRETARY OF STATE	
natu	Revision 188		34/28/1999 09:00 : 1822 CT: 114678 BH: 211481	

Printed Name: STEVE DELKERON

Capacity: OWNER

(see instruction # 8 on back of form)

1 @ 20.66 = 26.66 ASSUM NAME # 2

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