

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2006 JUL 17 AM 10: 27

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

 The assumed business name which the unbusiness is: 	ndersigned use(s) in the transaction of
HARMON AND ASSOCIATES	REALTY
The true name(s) and business address(e business under the assumed business name Name Calvin L Harmon	es) of the entity or individual(s) doing
3. The general type of business transacted u	inder the assumed business name is:
 Wholesale Trade □ Construction □ Services □ Agriculture □ Manufacturing □ Mining ✓ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Calvin L. Harmon 1823 N Whitley Dr. Fruitland, Id. 83619	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above): 	ent Phone number (optional):
	Secretary of State use only
Signature: Calvins: Flamman Printed Name: Lplyin L. Harman	404/2000 ad 04/2000
Capacity/Title: Owner	IDAHO SECRETARY OF STATE
(see instruction # 8 on back of form)	CK: 5341 CT: 262396 BH: 9651

CK: 5341 CT: 202396 BH: 965126 1 8 25.88 = 25.80 ASSUM NAME # 2

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