CERTIFICATE OF ASSUMED BUSINESS NAME يە ب Ten 3 1 co M 19 To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of the state adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: (onstructu 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Stevens N3781 Greens FORRY Post Falls Id. 3. The general type of business transacted under the assumed business name is: Welding & fabrication See categories on the reverse 4. The name and address to which correspondence should be addressed: Same on above Signed Slarp S. Stevens -----By Capacity Owner Submit Certificate of Assumed Customer # Business Name and \$20.00 fee to: Secretary of State use only SECRETARY OF STATE Secretary of State DATE 02/03/1997 700 West Jefferson 0900 60801 2 PO Box 83720 CK #: 64080012 CUST# 75921 ASSUM NAME: 19 20.00= 20.00 Boise ID 83720-0080 D