Signature: __/_

Printed Name: __

Capacity/Title: () Capacity/Title:

(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.

FILED EFFECTIVE

2005 FEB -7 AM 9: 27

SELECTARY J AND STATE OF IDAHO

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

1. The assumed business name which the undersig	ned use(s) in the transaction of
business is:	
Holiday Construction	
O The two nemo(s) and business address(as) of the antity or individual(s) doing	
 The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: 	
Name	Complete Address
· · · · · · · · · · · · · · · · · · ·	293 Upper Fords Creek Rd.
	LUTINO ID
	83544
3. The general type of business transacted under the	ne assumed business name is:
Retail Trade Transportation and Public Utilities	
Tetali Hade	
	Submit Certificate of Assumed Business
Manufacturing Mining	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	
4. The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
Halidey Construction	PO Box 83720
3293 ypper Fords Crack Rd	Boise ID 83720-0080 208 334-2301
OW FIND FD. 83544	200 334-2301
- /	Phone number (optional):
Name and address for this acknowledgment copy is (if other than # 4 above):	
Copy is (if other trial) # 4 above).	208-476-4456
	Secretary of State use only

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IDANO SECRETARY OF STATE

@2/07/2005 @5:00

CK: 10% CT: 158010 BH: 791477

1 0 25.00 = 25.00 ASSUM NAME 8 2

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