Capacity:

OWNER

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) 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: 4-J PLASTERING 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name PO BOX 340, IONA ID 83427 JAMES B. CARSON JR. 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing Finance, Insurance, and Real Estate Wholesale Trade Agriculture Construction Mining Services 4 The name and address to which future correspondence should be addressed: Submit Certificate of BANK OF EASTERN IDAHO Assumed Business Name and \$20.00 fee to: 1800 CHANNING WAY Secretary of State IDAHO FALLS ID 83404 700 West Jefferson **Basement West** 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only IDANO SECRETARY OF STATE 10/26/1998 09:00 CK: 1637 CT: 1049 BH: 155962 Signature: 1 9 20.00 = 20.00 ASSUM NAME # 2 Printed Name: