

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

D 87334

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

2005 APR 29 411 9: 14

STATE OF HUMBU

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

Capacity/Title: MORTON MASONA

(see instruction #8 on back of form)

 The assumed business name which the ur business is: 	
MORTON	ASONRY
The true name(s) and <u>business</u> address(estable) business under the assumed business name Name	ne:
	Complete Address
FRED VOSEPH MORTON	636 4th and
(4 4 3 3 3 4 5 4 5	TWIN FALLS ID
	83301
A TI	
The general type of business transacted ur	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: FRED MORTON G36 4TH AV. W TWIN FALLS TD	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme	ent Phone number (optional):
COPY is (if other than # 4 above):	ent Thomas namber (optional).
copy to (it office that it value).	
	Secretary of State use only
nature: Signature required) nted Name: FRED MORTON	IDAHO SECRETARY OF STATE 94/29/2005 05:0 CK: 2492 CT: 158010 BH: 8075 1 0 25:00 = 25.00 ASSUM NOME