Printed Name: <u>Herbert</u>

OWNER

(see instruction # 6 on back of form)

Capacity:

· (1) (2) (2)

CERTIFICATE OF ASSUMED BUSINESS NEW (Please type or print legibly. See instructions on reverse.) 99 AUG -3 AU 8: 54 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. STATE OF IDAGO 1. The assumed business name which the undersigned use(s) in the transaction of business is: Brice Construction 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 . X/oslost 3 2000 E Paradise Lone, Meridian Id 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Minina 4. The name and address to which future Phone number (optional): 208 - 888 - 3746 correspondence should be addressed: Submit Certificate of 2000 E. Paradise Lone Assumed Business Name and \$20.00 fee to: redean Adaha 83642 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY is (if other than #4 above). PO Box 83720 Bolse ID 83720-0080 208 334-2301 Secretary of State use only Signature

IDANO SECRETARY OF STATE

08/63/1999 09:00 CK: 108190 CT: 118765 BH: 238968

1 8 29.00 = 29.00 ASSUM MANE # 2

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