CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE O Pursuant to Section 53-504, Idaho C gives notice of adoption of an Assum	ode the undetstream over a sum
The assumed business name which the business is:	
HOLCOMB CONSTRUCTION	
The true name(s) and business address(business under the assumed business name Name	(es) of the entity or individual(s) doing ame is/are: <u>Complete Address</u>
LANCE D HOLCOMB	RURAL RT 2 BOX 677 GRANGEVILLE, IDAHO 8353
JENNIFER K HOLCOMB	RURAL RT 2 BOX 677 GRANGEVILLE, IDAHO 8353
3. The general type of business transacted (mark only those that apply) Retail Trade	ing Transportation and Public Utilities Finance, Insurance, and Real Estate
RT 2 BOX 677	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgme copy is (# other than # 4 above): U.S. BANK OF IDAHO 104 E MAIN	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
GRANGEVILLE, IDAHO 83530 Signature: Lalleland	Secretary of State use only IDAN SECRETARY OF STATE DATE 05/29/1997 0900 96931 2
Printed Name: Owner LANCE Holica	CK 8: 1024 CLISTS 38278 RESUM NOME 18 20.00= 20.00
Capacity: OWNER	11017

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