

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2004 MAR 23 AM 8: 41

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

NOTE. See manded on total or and the	STATE OF IDAHO
The assumed business name which the unders business is:	igned use(s) in the transaction of
HANDY MAN HELMBOLT	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
Tim HelmBolt 7	619 COWEN ST
1	30150 Id 83709
	ada county
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation an Wholesale Trade Construction	d Public Utilities
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	Manie and \$25.00 fee to.
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
HANDY MAN HELMBOLT	PO Box 83720
7619 COWEN ST	Boise ID 83720-0080 208 334-2301
Boise FD 83709	200 334-2301
Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above).	1208)571-7619
	Secretary of State use only
Signature: Signature required)	
Printed Name: Tim HelmBolT	IDAHO SECRETARY OF STATE 93/23/2004 05:00000000000000000000000000000000
Capacity/Title:	IDAHO SECRETARY OF STATE 93/23/2004 05:00
(see instruction # 8 on back of form)	CK: 1989 CT: 158818 BH: 734986