

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

12 MAY 18 AM 9: 12

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

Inland Em	pire Sand & Gravel
2. The true name(s) and <u>business</u> address business under the assumed business name	name: <u>Complete Address</u>
W. R. Lemke	5120 W. Overland Road #209, Boise, ld 83705
B. The general type of business transacted Retail Trade Transportat Wholesale Trade Construction Services Agriculture Manufacturing Mining	tion and Public Utilities on Submit Certificate of
Finance, Insurance, and Real Esta	Assumed Business ate Name and \$25.00 fee to:
I. The name and address to which future correspondence should be addressed: W. R. Lemke	Secretary of State 450 North 4th Street PO Box 83720
5120 W. Overland Road #209 Boise, Idaho 83705	Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgn copy is (if other than #4 above):	nent
nature: <u>w · Potes Jewl</u>	Secretary of State use only
ted Name: W. Robert Lemke	_
racity/Title: Manager rature: 0 - Robert Control ted Name:	IDAHO SECRETARY OF STATE 95/18/2012 05:00 CK: 1242 CT: 132943 BH: 1324801
acity/Title:	- 1 @ 25.00 = 25.00 ASSUM NAME #

abn.pmd Rev.07/2010

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