

## 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.

00 007 16 AH 9: 47

STATE OF IDAHO

D59117

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

| The assumed business name which the unders business is:  |   |
|--|---|
| Harrell  | CONSTRUCTION  |
| 2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Mitchell Harrell   | the entity or individual(s) doing  Complete Address  Clega ST Boise do  |
| 3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture  Manufacturing Mining   |   |
| Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:    Manual Color   Color   Samuel   Samuel | Name and \$20.00 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 acknowledgment copy is (if other than # 4 above):   | Phone number (optional): 208-345-2475   |
|  | Secretary of State use only   |
| Signature: Mitchell (algorithme required)  Printed Name: Mitchell (tarrell)  | 1DAHO SECRETARY OF STATE 10/16/2002 05:00  CK: CASH CT: 158810 RH: 576275 1 2 20.00 = 20.00 ASSUM NAME # 2                  |