CERTIFICATE OF ASSUMED (Please type or print legibly. See instr	BUSINESSANAME ructions on reverse: MP/3
To the SECRETARY OF STATE, STATE O Pursuant to Section 53-504, Idaho C gives notice of adoption of an Assum	ode, the undersigned of the land of the la
1. The assumed business name which the business is: L A Welding	undersigned use(s) in the transaction of
The true name(s) and business address business under the assumed business r	name is/are:
Name Lance WAlker	Complete Address 770 J. If Jan Falls Id 33402
anita WAIKE	770 J I Idane Fall, Id 35402
LEA WELLING	
The general type of business transacted under the assumed business name is: (mark only those that apply)	
☐ Retail Trade☐ Wholesale Trade☐ Agriculture☐ Services☐ Construction	Finance, Insurance, and Real Estate on Mining
4. The name and address to which future correspondence should be addressed:	Phone number (optional): 208-525-9362
770 7. 4	Submit Certificate of
Idah, Fella Id.	Assumed Business Name and \$20.00 fee to
83402	Secretary of State
E. Normand address for this asknowledge	700 West Jefferson
 Name and address for this acknowledge copy is (if other than # 4 above); 	ment Basement West PO Box 83720
	Boise ID 83720-0080
	208 334-2301
	Solinely Speller up Staye
	03/12/1998 69:66 CK: 2255 CT: 95588 BH: 98894 1 @ 28.88 = 28.88 ASSUM NAME
Signature: Janu Walker Printed Name: LAnce WAlker	1 0 20.00 = 28.00 ASSUM NAME
Printed Name: LAnce WAIKer	012959
Capacity: Owner	i u no
(see instruction # 8 on back of form)	3