CERTIFICATE OF 07 SEP 20 AM 8: 43 ASSUMED BUSINESS NAME ECRETARY OF STATE

	submits for filing a certificate of Assumed Business i	Name.
•	Please type or print legibly. NOTE: See instructions on reverse before filing.	
1. Th	ne assumed business name which the undersigned usiness is: Haquist Horseshoeing	ed use(s) in the transaction of
2. Th	he true name(s) and business address(es) of the disiness under the assumed business name: Name Richard S Halauist 127	entity or individual(s) doing Complete Address 15 N 400 E Rupert ID 833
3. Th	e general type of business transacted under the a Retail Trade Transportation and Put Wholesale Trade Construction	3)
X	Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
cor R	e name and address to which future respondence should be addressed: ichard Halquist 275 N 400 E Rupert 10 83350	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	ame and address for this acknowledgment py is (if other than #4 above):	Phone number (optional): 208 532 3755
 nted Na	(eignalure required)	Secretary of State use only

Sig Pri Capacity/Title: ()Wher

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE @9/20/2007 65:00 CK: 3121 CT: 158018 BH: 1876565 1 8 25.00 = 25.00 ASSUM MANE # 2

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