

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 2006 APR -3 PM 1:30

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

D98215

VISION BUILDERS	
2. The true name(s) and business address(es) o business under the assumed business name: Name	of the entity or individual(s) doing Complete Address
	•
MITCHELL D. CAMPBELL, SR.	NTN HOME ID 83647
3. The general type of business transacted unde	er the assumed business name is:
	and Public Utilities
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name 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
MITCHELL D. CAMPBELL, SR.	PO Box 83720
1950 NYTH EAST	Boise ID 83720-0080
MTN: HOME, ID. 83647	208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	t Phone number (optional):
	Secretary of State use only
gnature: Mitchell Campbell (signature required)	1DAHO SECRETARY OF STATE 1DAHO SECRETARY OF STATE 104/03/2006 05: CX: NO CX # CT: 158010 BH: 9
nted Name: MITCHELL D. CAMPBELL	IDAHO SECRETARY OF STATE OF ST
pacity/Title: OWNER	CK: NO CK # CT: 158019 BH: 9