

Printed Name:

Printed Name:

Signature:

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2016 JUL 11 AM 10: 17

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

1. The assumed business name which the undersigned use(s) in the transaction **Crooked Nail Construction** 2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1): 501 E 500 N Firth, ID 83236 **RV** Burke (Name) (Address) (Name) (Address) (Address) (Name) (Name) (Address) 3. The general type of business transacted under the assumed business name is: Retail Trade Construction Transportation and Public Utilities Agriculture Wholesale Trade Mining Manufacturing Finance, Insurance, and Real Estate Services 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment CODY IS (if other than # 4): **RV** Burke (Name) (Name) 501 E 500 N (Address) (Address) Firth Idaho 83236 (City) (State) (Zipcode) (State) (Zipcode) (City) Printed Name: RV Burke Secretary of State use only Signature:

IDAHO SECRETARY OF STATE 07/11/2016 05:00

CK:1001 CT:158010 BH:1537024 1@ 25.00 = 25.00 ASSUM NAME #2

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Rev. 08/2015