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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu	NAME undersigned	OB APR 30 AM 8: 17
Please type or print legibly.         SECRETARY           NOTE: See instructions on reverse before filing.         STATE 0		SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is: <u>Fenix Homes</u>		
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Fenix Construction, INC 1003 E. State St c94269 Eagle ID 836110		
<ul> <li>3. The general type of business transacted und</li> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> <li>4. The name and address to which future correspondence should be addressed:</li> <li>Fenix Construction, INC, 6D3, E. State St, Eagle, ID, 83666</li> <li>5. Name and address for this acknowledgmer copy is (if other than # 4 above):</li> </ul>	Ind Public Utilities Submit Assum Name Idaho S 450 N 4 PO Box Boise II (208) 3	Certificate of ed Business and <b>\$25.00</b> fee to: ecretary of State Ith Street
Signature:	g. tooptionmetabn formstabn.p65 Reweed042003	IDAHO SECRETARY OF STATE 04/30/2008 05=00 CK: 2554 CT: 158010 BH: 1112734 1 8 25.90 = 25.08 ASSUM NAME 1
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