



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 JAN 25 AM 9:07

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Dunfee Backhoe/Hauling

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
<u>Clive Dunfee (H+W)</u>	<u>837 8th Street Mailing/P.O. Box 225</u> <u>Challis, Id. 83226</u>
<u>Reza F. Gray (H+W)</u>	<u>837 8th St. Mailing/P.O. Box 225 Challis, Id. 83226</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input checked="" type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Dunfee Backhoe/Hauling
P.O. Box 225
Challis, Id. 83226

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature:

Clive Dunfee
(signature required)

Printed Name:

Clive Dunfee

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

208 879 6447 Bus
208 589 9423 Cell

Secretary of State use only

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IDAHO SECRETARY OF STATE
01/25/2006 05:00
CK: 3942 CT: 158018 BH: 934002
1 @ 25.00 = 25.00 ASSUM NAME # 2