Capacity:\_

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions of present)

5. Name and address for this acknowledgme copy is (# other than # 4 above):  Same as above (##)	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
correspondence should be addressed:  3/254 Pitman LN.  Parma Id. 83660	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
3. The general type of business transacted to (mark only those that apply)  Retail Trade	ing Transportation and Public Utilities Finance, Insurance, and Real Esta
Christopher L. Clendenon	Complete Address 31254 Pitman LN. Parma Id. 83/60
The true name(s) and business address( business under the assumed business na	es) of the entity or individual(s) doing
C. A.C. Construction	International

28.88 = 20.90 ASSUM NAME # 2

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