

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

08 NOV 12 AM 8: 41 SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the ur business is: Control Constructions The true name(s) and business address(express under the assumed business named business	s) of the entity or individual(s) doing
Name	Complete Address
Adam Prince	1710 N. Cecil Rd ADT D-3
	POST FALLS, ID 83854
3. The general type of business transacted u	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgm copy is (if other than #4 above):	Phone number (optional): 308-704-94-30
	Secretary of State use only
gnature: Alemanical (signatured)	IDAHO SECRETARY OF STATE 1.12/2008 05:00 CK: 6399 CT: 84919 BH: 11439
inted Name: Aday Prince	IDAHO SECRETARY OF STATE
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