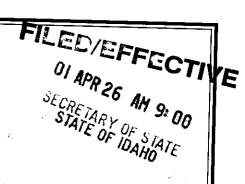


## CERTIFICATE OF ASSUMED BUSINESS NAME

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.



	—— · · · · · · · · · · · · · · · · · ·
The assumed business name which the urbusiness is:  Allen Construct	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Seth Allen  Raini Allen	of the entity or individual(s) doing e: <u>Complete Address</u> <u>P.O. Box 325</u> Lucile, TD 83542
3. The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Seth Allen Po. Box 325 Lucile 1D 83542  5. Name and address for this acknowledgment copy is (if other than #4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: Seth J. Allen Capacity: Owner	Secretary of State use only IDAHO SECRETARY OF STATE  24/26/2001 09:00  CX: 493 CT: 145585 BH: 393553  1 2 28.60 = 28.66 ASSUM NAME # 2
(see instruction # 8 on back of form)	D 414821