

Signature:

Capacity: OWNER

Printed Name: TIM SHEHEE

(see instruction #8 on back of form)

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.

FILED/EFFECTIVE

Oct 26 12 51 PH '01

SEC

NOTE: See instructions on reverse before fi	ling.
 The assumed business name which the undersigned use(s) in the transaction of business is: ALL STATE CONSTR UCTION 	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Shelle 2	Complete Address
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: 29 30 Por ST UNIT C NAMPA 83687	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above): S A w	Phone number (optional): 870 7394
	Secretary of State use only

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IDAHO SECRETARY OF STATE 10/26/2001 05:00 CK: none CT: 152884 BH: 426446 1 @ 20.00 = 20.00 ASSUM MAME # 2

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