

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 70th JUN 28 P 2: 29

700N JUN 28 P 2: 29

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

NOTE: See instructions on reverse before minig.	· · · · · · · · · · · · · · · · · · ·
1. The assumed business name which the undersigned up business is:	
business is: A.S. McKayS HandyMan Service 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing	
business under the assumed business name. Name Sason Andrew McKay Bois	Complete Address 7 W. Pack Saddle Ct. 5e, Folo 83709
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Puble Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: A.S. MCKay'S Hawky May Service 7657 W. Fack Saddle Ct. Boist Tol., 93709 5. Name and address for this acknowledgment copy is (if other than #4 above):	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):
	Secretary of State use only
Signature:	IDANG SECRETARY OF STATE 96/29/2004 05:00 CK: 114 CT: 150010 BH: 752922 1 0 25.00 = 25.00 ASSUM NAME # 2