

FILED/EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

NO FEB 14 AM 9:05  
STATE OF IDAHO

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

House Doctor

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name Rod Pooles Address 460 Ash, TF 83301

3. The general type of business transacted under the assumed business name is:

Construction  
See categories on the reverse

4. The name and address to which correspondence should be addressed:

Rod Pooles 460 Ash Twin Falls ID 83301

Signed Rod Pooles  
By Rod Pooles  
Capacity sole Proprietor

Submit Certificate of Assumed  
Business name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #  
Secretary of State use only

IDAHO SECRETARY OF STATE

02/14/2000 09:00  
CR: 1743 CT: 126629 BH: 289733

1 @ 20.00 = 20.00 ASSUM NAME # 2

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