

Capacity/Title:

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

215 MAY 13 PM 1:45

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE

	150 A 10
The assumed business name which the undersigned business is:	use(s) in the transaction of
D bar H Construction	
2. The true name(s) and business address(es) of the elements business under the assumed business name:  Name  Derih Hitesman 75 5	ntity or individual(s) doing  Complete Address  age (Oach Wy. Kuna, 10 83634)
3. The general type of business transacted under the a  Retail Trade Transportation and Pub Wholesale Trade Agriculture	
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Detik Hiteshan / 75 stage coach wy knows 1000000000000000000000000000000000000	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	
Child O Z	Secretary of State use only
Signature: Denk Hitesman  Capacity/Title: Owner	IDAHO SECRETARY OF STATE 05/13/2015 05:00 CK:CASH CT:158010 BH:1475355 16 25.00 = 25.00 ASSUM NAME #2
Signature:	D179010
Printed Name:	

abn.pmd Rev. 07/2010