

business is:

D & J MORTENSEN CONSTRUCTION

"AS IN OPAL"

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	Complete Address
<u>OPAL L PALMER</u>	<u>1735 MANZANITA ST TWIN FALLS ID</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing                          | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture                            | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input checked="" type="checkbox"/> <sup>sub</sup> Construction | <input type="checkbox"/> Mining                              |

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

Phone number (optional): \_\_\_\_\_

FLAGGING & TRAFFIC CONTROL  
1735 MANZANITA ST  
TWIN FALLS ID 83301

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: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

(see instruction # 8 on back of form)

Revision 1/98

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Secretary of State use only  
IDAND SECRETARY OF STATE

06/14/1999 09:00  
CK: 2588 CT: 116796 BH: 225439

1 @ 20.00 = 20.00 ASSUM NAME # 2

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