CERTIFICATE OF ASSUM (Please type or print legibly.	
To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idate gives notice of adoption of an Assertation (Section 2014).	~~~ IL PER 1. ~~
The assumed business name which the unbusiness is: Battle Creek	idersigned use(s) in the transaction of AHO
The true name(s) and business address(es business under the assumed business nan	
	Complete Address 6495 W Elm Brook Dr Boise 83703
Francine Gonzales	6995 W Elm Brook Dr Boise 8370.
The general type of business transacted ur (mark only those that apply)	nder the assumed business name is:
☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☑ Construction	Finance, Insurance, and Real Estate Mining
The name and address to which future P correspondence should be addressed: Battle Creek	Phone number (optional): (208) 853 3608
6996 W Elm Brook Dr	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDANO SECRETARY OF STATE
Signature: Fraullie mules	IDAHO SECRETARY OF STATE 69/14/2000 69:00 CK: 6520 CT: 135969 BH: 346241
Printed Name: Francise Gonzales	1 9 20.00 = 20.00 ASSUM NAME # 2
Capacity: Partner (see instruction # 8 on back of form)	038950