

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 MAY 20 AM 9: 50

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

SECRETARY OF STATE STATE OF IDAHO

| instructions are included on back or appr | STAIL OF IDATE |
|--|--|
| The assumed business name which the und business is: All Construction | lersigned use(s) in the transaction of |
| The true name(s) and <u>business</u> address(es) business under the assumed business name | e : |
| <u>Name</u> | Complete Address |
| τ | 368 Soutrum Dr. Theko Falls ID 83401 |
| Tony Taylor | WHAN Vision Cr Thats Falls DD 53401 |
| 3. The general type of business transacted und | der the assumed business name is: |
| Retail Trade Transportation Wholesale Trade Construction Services Agriculture | and Public Utilities |
| ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| The name and address to which future correspondence should be addressed: Taylor | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 |
| Ideho Fells ID 83401 | 208 334-2301 |
| Name and address for this acknowledgment copy is (if other than # 4 above): | t |
| | Secretary of State use only |
| ignature: / y / y / autor ignature: / autor igna | IDANO SECRETARY OF STATE 95/20/2011 95:00 CK: 58814 CT: 259832 BH: 1274668 1 0 25.00 = 25.00 ASSUM NAME # 2 |

abn.pmd Rev. 07/2010 DI47785