



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

09 OCT 20 AM 8:08

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned ~~uses~~ in the transaction of business is:

TD Concrete & Excavation

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

Name

Complete Address

(Tad) Keith L. Delmen 954 Eden rd Eden Id 83325
DENNISE Rodriguez 954 Eden rd. Eden Id 83325

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

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

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

TD Concrete & Excavation
954 Eden rd.
Eden Id 83325

5. Name and address for this acknowledgment copy is (if other than # 4 above):

DENNISE Rodriguez
954 Eden rd
Eden Id 83325

Signature: DENNISE Rodriguez
(signature required)

Printed Name: DENNISE RODRIGUEZ

Capacity/Title: 50% Owner

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

g:\corpform\main form\main.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
10/20/2009 05:00
CK: 1002 CT: 150810 IN: 1191853
1 @ 25.00 = 25.00 ASSUM NAME # 2

D134364