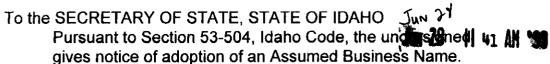
Capacity:

Partner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS (Please type or print legibly)





	The assumed business name which the undersigned (SARK fife Tansaction of STATE OF IDAH)		
	business is: PALMER SHELDAHL BUIL	DERS	
2.	The true name(s) and business address business under the assumed business n	• •	· · · · · · · · · · · · · · · · · · ·
	<u>Name</u>		Complete Address
	Kennth L Palmer	_1916_S	Grant Avenue
		Boise,	ID 83706
	Donald P Hheldahl	<u>1916 S</u>	Grant Avenue
			Idaho 83706
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	□ Retail Trade □ Manufacture □ Wholesale Trade □ Agriculture □ Services x Construction		Transportation and Public Utilities Finance, Insurance, and Real Est Mining
4.	The name and address to which future correspondence should be addressed:		
	Palmer Sheldahl Builders		Submit Certificate of Assumed Business
	1916 S Grant Avenue		Name and \$20.00 fee to:
			Secretary of State
	Boise, Idaho 83706		700 West Jefferson
5.	Name and address for this acknowledgment		Basement West
	CODY IS (if-other than # 4 above).		PO Box 83720
			Boise ID 83720-0080 208 334-2301
	<u> </u>		200 004 2001
			Secretary of State use only
		on 2/97	Secretary of State use only IDAHO SECRETARY OF STATE
at:	ire: Small PShililah	Revision 2/97	•

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