CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILEDEFFECTIVE 2006 DEC -7 AM 10: 00

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

2. The true name(s) and business address business under the assumed business n Name Truck L. Hess	(es) of the ame:	
		NAMPA, ID. 83686
3. The general type of business transacted Retail Trade ☐ Transportate ☐ Wholesale Trade ☒ Construction ☒ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ☐ THELL HESS ☐ THESS ☐	ion and Pton	assumed business name is: ablic Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
	99ďu	Secretary of State use only
Printed Name: THER L. HESS Capacity/Title: OWNER (see instruction # 8 on book of fam.)	g.tcorptometabn formstabn.p86 Revised D4/2003	IDAHO SECRETARY OF STATE 12/07/2006 05:00 CK: 1108 CT: 206965 BH: 1018038 1 \$ 25.00 = 25.00 ASSUM NAME \$

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